

SATELLITE CLUB APPLICATION

All information requested on this form is required. Incomplete forms result in processing delays. Submit the signed and completed form to your Club and District Support representative.

BACKGROUND INFORMATION	此衛星社目前是否是一個一般扶輪社?
The satellite club is currently a Rotary club: ☐ Yes ☐ No	Yes = 目前的扶輪社轉成衛星社
If yes, please provide the club number:	No = 在輔導社中成立新的衛星社
CLUB NAME	若填Yes請填入此社的ID號碼,此社將 被終止之後轉為衛星社
The name of this satellite club will be (check one):	饭於止之後特為闹生性
□ Rotary Satellite Club of 衛星社命名 (擇一勾選)	
□ Rotary Satellite E-Club of 衛星社或網路衛星社	
	衛星社命名
(complete name includes full sponsor club name, additional qualifier, cou	ɪntry/geographical area) 輔導社社名
(complete name includes community, state/province/prefecture, and cour	ntry/geographical area)
LOCALITY	
The locality* of this satellite club is	and the surrounding area.
*A locality is a geographic description of the area the club ser same as the sponsor club or the surrounding area.	ves. The locality of a satellite club is the
OFFICERS	
Chair:	衛星社主委姓名
Secretary:	
Chair-elect:	下屆主委姓名
WEEKLY MEETING 例會的 (每周幾, 時間, 場地, 地址)	
Day of week: Time:	
Name of meeting place:	
Address:	City:
State/Province: Postal Code:	Country:
For Rotary e-clubs only: (網路衛星社需填此欄位: 網址與個	例會時間)
Website URL for online meetings:	
Time (include official website posting time for Rotary e-clubs):	

If the satellite club has a preferred r information below:	mailing address, such as a	post office bo	x, please provide that	
Address:		Ci	ty:	
State/Province:	Postal Code:	Co	ountry:	
Phone (include country/city/area coc	les):			
Fax (include country/city/area codes)	:			
Email:	Website:			
ROTARY MAGAZINES (check one) 衛星		擇一勾選)		
☐ Everyone subscribes to <i>The Rotari</i>	an.			
☐ Some or all of our members subs ———————————————————————————————————	eryone subscribes to eithe	r it or <i>The Rot</i>	tarian. (Please ensure that	
☐ Satellite club is in a country excus	5			
•	表衛星社將遵守所有的 i		- · · · · · · · · · · · · · · · · · · ·	
Please read the following items care qualifications set forth in RI's constitutions	efully. Your signature certi	fies that this s		與內規
If approved, this satellite club will 1. Abide by the Constitution and B 2. Abide by the Standard Rotary Cl	()	3. 與輔導社維 4. 依據標準技	詩良好關係及遵循其決定 ·輪章程提供輔導社相關報告	
3. Maintain a good relationship wi	th the sponsor club and a	bide by its de	cisions	
4. Provide the sponsor club with al			-	
Promptly apprise the sponsor clu members to the sponsor club in		iges and subm	iit ki per capita dues for ali	
The signatures of the chair and secretacordance with the constitutional capplication is accurate.				
Satellite Club Chair's Signature:	衛星社	<u> </u>	Date:	
Satellite Club Secretary's Signature:	衛星を	上秘書 簽名	Date:	
As officers of the sponsor club, we contained the sponsor club, we contain the sponsor club, and the sponsor club, we contain the sponsor club, and the sponsor club, are sponsor club, and the sponsor club, and the sponsor club, and the sponsor club, and the sponsor club, are sponsor club, are sponsor club, and the sponsor club, are sponsor club, are sponsor club, and the sponsor club, are	•		to of Dious date and initial of the	
RI Board of Directors, and we er				
All members of the provisional sa education program under the gu			opriate orientation and	
3. Officers of the sponsor club will p	•		_	
The members of the satellite club will pay their RI per capita dues t		oonsor club's s	emiannual report (SAR) and	
The satellite club has set for its r fee that allows the club to cover		dmission fee	and an appropriate annual	
6. The district governor has been in	nformed of our intention	to sponsor a s	atellite club	
Sponsor Club President's Signature:			Date:	
Sponsor Club Secretary's Signature:	輔導社	秘書 簽名	Date:	



SATELLITE CLUB MEMBER INFORMATION FORM

Complete one information form for each satellite club member. Click here to download additional member information forms.

Please type or print clearly	
Title (Mr., Ms., Mrs., Dr., Rev., etc.):	Suffix (Jr., Sr., III, etc.):
Family name:	
First name:	Middle name:
Gender: □ Male □ Female	
Preferred language:	
Former/current Rotarian: ☐ No ☐ Yes	
If yes, RI membership ID number:	
Name of former/current club:	
Former/current firm:	
Position:	
For phone and fax numbers, include country/c	ity/area codes.
Home Phone:	Business Phone:
Home Fax:	Business Fax:
Mobile:	Email:
Mailing address* (check one):	
☐ Residence ☐ Business ☐ Other	
Address:	City:
State/Province: Postal	Code: Country:
*If post office box, please provide an alternate	e address for courier delivery.
Alternate address (complete only if mailing address	s is a PO Box):
☐ Residence ☐ Business ☐ Other	
Address:	City:
State/Province: Postal	Code: Country:
Magazine: □ The Rotarian □ Rotary regio	anal magazine