

Prospective Member Questionnaire Form

If you are interested in joining the Zonta Club of St. Louis, please return the following information to our Membership Chair:

Linda White
8721 Charlton Lane
Affton, MO 63123
Attn: Zonta Club of St. Louis

First Name: _____ Last Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone Number: _____ Mobile Home

E-mail: _____

Gender: Female Male Other

I am APPLYING as an: Individual Member Young Professional Individual
 Reinstating Individual Membership (under 30 years of age)
Date of Birth: _____

Occupation / Title: _____

Firm or Institution Name: _____

I am: Owner Partner Manager Employee Retired Student

I am a ZONTA Education Award Recipient: Amelia Earhart Fellowship
 Jane M. Klausman Women in Business Scholarship
 Young Women in Public Affairs

I am applying as a former Z Club or former Golden Z Club member. Club: _____

I am applying as a former ZONTA Club Member. Club: _____

ZONTA International is a global network of more than 29,500 members committed to securing a world where gender equality is a reality. The ZONTA Club of St. Louis is only one of many clubs worldwide that participates and supports ZONTA International's network. Please confirm the following 3 commitments:

I am committed to upholding the mission, objects and vision of the ZONTA Club of St. Louis and ZONTA International and I shall comply with the rules and policies of ZONTA International. (You may request to view the governing documents by emailing your request to: memberrecords@zonta.org)

I give my consent to the ZONTA Club of St. Louis, ZONTA International and ZONTA International Foundation to store the personal membership information I have provided by applying for membership and added during my membership years, including photographs taken of me in connection with ZONTA activity, on ZONTA's servers in the USA. I undertake to renew or withdraw this consent on an annual basis.

I undertake not to sell, rent, or disclose any member data information in my possession, to any third party. For more information please view the ZONTA International privacy policy at <https://www.zonta.org/Privacy>. The ZONTA Club of St. Louis abides by the same policy.

We want to keep in contact with you and ensure that you are kept up to date with ZONTA's work globally and locally. Please check the boxes to confirm your agreement to the following:

I would like to receive communications from the ZONTA Club of St. Louis and ZONTA International.

If I become a member, I give my permission to be included in the ZONTA Club of St. Louis membership directory and the ZONTA International electronic membership directory.

Please contact me by: Phone (residence) Phone (business) E-mail FAX Mail

The best time to contact me is: Morning Afternoon Evening

I heard about Zonta International through:

A friend A local Zonta club A business associate A current Zonta member

Local Zonta club Website Zonta International Website Internet search engine

Newspaper / Magazine Television / Radio Other: (please specify) _____

Comments:

Signature _____ Date _____

Name (printed): _____

Thank you for your application. I will be contacting you soon. Your application will be reviewed for approval at our monthly Board meeting. You will be contacted following the approval process. Please feel free to contact me at any time: Linda White 636-875-0095 or lindawhite.stl@gmail.com.