



TOASTMASTERS INTERNATIONAL®

APPLICATION TO ORGANIZE A TOASTMASTERS CLUB

Send completed forms and money to:

23182 Arroyo Vista • Rancho Santa Margarita, CA 92688 USA
PO Box 9052 • Mission Viejo, CA 92690 USA • (949) 858-8255 • FAX (949) 858-1207

The undersigned applicant club, operating provisionally as a Toastmasters club since _____, _____ hereby applies for membership in Toastmasters International in accordance with Article III, Section 3, of the Articles of Incorporation and Bylaws of Toastmasters International and requests permission to organize a Toastmasters club in: City _____ State/Province _____ Country _____ Date _____.

It is understood that such permission when granted will give this group the right to use the name, procedures and materials of Toastmasters International as a provisional club for four (4) months from the date received by World Headquarters.

It is agreed that the right to use the Toastmasters emblem, the name Toastmaster or Toastmasters shall be conditioned upon permission for such use being granted by Toastmasters International; such use shall be discontinued if Charter is not granted, or if applicant club shall be required to do so at any time in the future for cause by Toastmasters International.

There are _____ persons interested in forming the club. It is believed that a total membership of at least _____ members can be secured during the organization period. In order to qualify for a charter, a club must have a minimum of 20 members, 17 of which cannot belong to another Toastmasters club.*

All Toastmasters clubs must meet the following minimum requirements: meet at least twelve (12) times per year; have members give oral speeches and give and receive oral evaluations; and give members the opportunity to develop and practice leadership skills.

Membership in a Toastmasters club is by invitation only, and is subject to a vote by the members of the club. No person shall be excluded from membership in a Toastmasters club, and no member shall be deliberately discriminated against, in the conduct of official Toastmasters programs, because of age (except those persons under 18 years of age), race, color, creed, gender, national or ethnic origin, sexual orientation, or physical or mental disability, so long as the individual, through his or her own efforts, is able to participate in the program.

If granted, the Charter and membership may be revoked by Toastmasters International for cause—including, but not restricted to: Conduct unbecoming a Toastmasters club; failure to remain in good standing with Toastmasters International; or abandonment of the Charter and membership by applicant club.

As club correspondent and on behalf of the applicant club, I agree to the terms and conditions listed above, signed, _____ Date _____.

Please type or print the following information:

Correspondent's Name _____

Address _____



Phone _____

E-mail _____

Sponsoring Organization (if applicable) _____

Please make 2 copies of this document. Mail one to World Headquarters, one to your District Governor, and keep the original in your club's permanent records.

PAYMENT:

Charter Fee of US \$125.00 is not refundable or transferrable. Clubs meeting in the state of California must include sales tax of 7.75% for a total of \$134.69.

- Charter Fee included with application.
- Charter Fee to be submitted within 30 days. (Kit will not be sent without fee.)
- Charter Fee to be submitted with per capita dues, service charge, and charter application forms. (Kit will not be sent without fee.)

Check Credit Card MC Visa American Express Discover (CIRCLE ONE)

No. _____ Exp. Date _____

Signature _____

MEMBERSHIP CATEGORY:

- | | |
|---|--|
| <input type="checkbox"/> Community Club | <input type="checkbox"/> Chinese |
| <input type="checkbox"/> Company Club | <input type="checkbox"/> English |
| Name _____ | <input type="checkbox"/> French |
| <input type="checkbox"/> Advanced Club | <input type="checkbox"/> Japanese |
| <input type="checkbox"/> Other | <input type="checkbox"/> Spanish |
| Specify _____ | <input type="checkbox"/> Visually Impaired (cassettes available) |
| | No. in Club _____ |

SPONSORING CLUB (up to two):

This is an existing Toastmasters club that assists in the formation of the applicant club.

Club No. _____ Club No. _____

INDIVIDUAL TOASTMASTER SPONSORS (up to two):

These are individuals who assist in the formation of the club before charter is granted.

Name _____ Home Club No. _____

Name _____ Home Club No. _____

The following is to be completed by the District Governor:

INDIVIDUAL TOASTMASTER MENTORS (up to two):

These are individuals who assist the club for at least six months after charter is granted.

Name _____ Home Club No. _____

Name _____ Home Club No. _____

New Club Alignment: Division _____ Area _____

District Governor Signature: _____ District No. _____

*Except in the case of advanced clubs where dual membership is a prerequisite. For further details regarding the requirements for advanced clubs, please contact your District Governor or World Headquarters.