



Application to Organize a Toastmasters Club

Send completed forms and payment to:

23182 Arroyo Vista • Rancho Santa Margarita, CA 92688 USA
PO Box 9052 • Mission Viejo, CA 92690 USA • Phone: 949-858-8255 • Fax: 949-858-1207

The undersigned applicant club 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 twelve (12) months from the date received by World Headquarters.

It is agreed that the right to use the Toastmasters emblem, the name Toastmaster or Toastmasters International 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. Toastmasters clubs agree they must not use the trademarks and copyrighted materials of other entities in any way without express written permission from the owner. This includes, but is not limited to, use in the club's name, club's domain name or other materials or publications.

In order to qualify for a charter, a club must have a minimum of 20 members, 17 of whom 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 or President's Name _____

Company Name (if applicable) _____

Address Line 1 _____

Address Line 2 _____

City _____ State/Province _____ Country _____ ZIP/Postal Code _____

Phone _____

Email _____

*Except in the case of advanced clubs where dual membership is a prerequisite.

Please make 1 copy of this document and mail to World Headquarters.
Keep the original in your club's permanent records.

Payment:

Charter fee of \$125.00(U.S.) is not refundable or transferable. Clubs meeting in the state of California must include sales tax of 7.75% for a total of \$134.69. Upon receipt of the completed Application to Organize and payment of \$125.00 charter fee, the club will receive their charter kit, which includes club administrative materials and an advance of 20 new member kits.* For a full list of items included in the charter kit please see Appendix.

*Distribution of these new member kits should only be to individuals who have paid the new member fee, which will be collected by Toastmasters International at time of charter.

Mail Check / Postal Money Order (U.S. funds drawn on a U.S. bank, payable to Toastmasters International)

Number _____ Amount \$ _____

Mail or Fax Credit Card Visa MasterCard AMEX Discover

Card Number _____ Expiration Date _____

Name as it appears on Credit Card _____

Signature _____

| MEMBERSHIP CATEGORY | LANGUAGE FOR OFFICER MANUALS | LANGUAGE FOR KITS | QTY NEW MEMBER KITS |
|---|--|--|----------------------------|
| <input type="checkbox"/> Community | <input type="checkbox"/> Arabic | <input type="checkbox"/> Arabic | _____ |
| <input type="checkbox"/> Company | <input type="checkbox"/> Chinese (Simplified) | <input type="checkbox"/> Chinese (Simplified) | _____ |
| <input type="checkbox"/> Government Agency | <input type="checkbox"/> Chinese (Traditional) | <input type="checkbox"/> Chinese (Traditional) | _____ |
| <input type="checkbox"/> Military | <input type="checkbox"/> English | <input type="checkbox"/> English | _____ |
| <input type="checkbox"/> Correctional Institution | <input type="checkbox"/> French | <input type="checkbox"/> French | _____ |
| <input type="checkbox"/> College | <input type="checkbox"/> German | <input type="checkbox"/> German | _____ |
| <input type="checkbox"/> Church | <input type="checkbox"/> Japanese | <input type="checkbox"/> Japanese | _____ |
| <input type="checkbox"/> Advanced Toastmasters | <input type="checkbox"/> Spanish | <input type="checkbox"/> Spanish | _____ |
| <input type="checkbox"/> Other | <input type="checkbox"/> Visually Impaired | <input type="checkbox"/> Visually Impaired | _____ |

Twenty kits will be shipped if only submitting charter fee.

Sponsoring Organization:

This is an organization that may pay dues, charter fees, new member fees, provide a meeting location, and/or allow meetings to occur on company time. Please be sure to spell out your sponsor's name completely.

Name _____ Website _____

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 _____ Member No. _____

Name _____ Member No. _____

Individual Toastmaster Mentors (up to two):

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

Name _____ Member No. _____

Name _____ Member No. _____

**New Club Alignment: District _____ Division _____ Area _____

**If alignment is unknown, please leave this section blank.