

**Request
For
Club Vision Facilitation Services for the
Rotary Club of _____**

This is a request from our Rotary Club to become part of a District 6250 Club Vision Facilitation effort that will assist clubs in identifying their own vision, mission and values as a club. A Club Vision Facilitation Team made up of 4 trained facilitators will walk our club through a planning process that prepares our club for greater, more effective service as Rotarians. This is a planning process designed by Rotarians specifically for Rotarians. This planning process will not only help our club, but it may also have applications in companies, businesses, and other community organizations to which our members belong. One could pay a thousand dollars for this kind of planning in a business setting. Clubs that chose to participate in club vision planning will host the event, which is only 4 hours long. Club vision facilitation planning events will begin as early as November 2009 and continue indefinitely.

Interested Rotary clubs within District 6250 are encouraged to complete this application and return it to the street address, e-mail address, or fax number listed above.

In order to complete this form, you will need to do the following: 1) discuss the features and benefits of a club facilitation effort with the members and /or with the club's Board of Directors; 2) endorse the process by a vote by the members and/or the Board; 3) briefly describe the current state of your club; 4) briefly describe how your club will benefit from this club vision facilitation effort; 5) select a day of the week and month that your club would like the event to take place; 6) select or appoint a Club Vision Facilitation Coordinator; 7) make arrangements to cover the cost of food, beverages, event room rental and other ancillary costs related to the event; 8) commit to holding a club assembly within 4 weeks of the visioning event to present the results of the event to the members of the entire club; 9) have your President and President-Elect sign this request for services certifying that the Board of Directors and/or club leaders and/or club members support this process and are committed to implementing all or portions of the action plan that arise from this club vision facilitation process.

Background

1. What is the current state of your club?

2. How do you think your club will benefit from this club vision facilitation effort?

Circle the day and month your club would like the club vision facilitation to take place

Tuesday Thursday Saturday

(NOTE: Weekday times are 5-9pm and Saturday 9a-1p)

NOV DEC, 2009. JAN FEB MAR APR MAY JUN JUL AUG SEP OCT NOV DEC, 2010 or Year: _____

Contact Information for Club Vision Facilitation Coordinator

Name _____
Last First Middle

Address _____
Street City State Zip

Phone Number _____ FAX _____ Cell Phone number _____

e-mail address: _____ Occupation _____

Number of years as a club member _____

List positions held in your Rotary Club and in your Rotary District.

Certification and Commitment

We certify that we have discussed Vision Facilitation Services for our Club at our Board Meeting and/or Club Meeting on (date) _____ and have agreed to submit this Request for Club Vision Facilitation Services and have made a commitment to hold a club assembly to present the results of the event to the members of the entire club.

President, Rotary Club of _____

President-Elect, Rotary Club of _____

Date: _____

Date: _____