



# INTERACT CLUB CERTIFICATION FORM

Interact is a club for young people ages 12 to 18 that empowers them to take action, become leaders, and gain a global perspective. Each Interact club is sponsored by one to three Rotary clubs. Before certification, the club must adopt the [Standard Interact Club Constitution](#) and [Recommended Interact Club Bylaws](#). There is NO fee for certifying an Interact club.

To officially certify an Interact club:

1. Complete all required fields (marked with an asterisk) on this form.
2. Obtain the signatures of the sponsor Rotary club president(s), Interact adviser, and district governor. Rotary will not certify the club if any signature is missing.
3. Submit the completed form by email ([interact@rotary.org](mailto:interact@rotary.org)), or by mail or fax to the appropriate [Rotary International office](#).

Once Rotary receives your form, it will take four to six weeks to certify the club and prepare the certificate.

Rotary will email it to the sponsor Rotary club president(s) to sign and present to the new Interact club. Even before the official certificate arrives, members of the new Interact club — under the guidance of the sponsor club — can meet, organize, and take action in the community.

## INTERACT CLUB NAME AND GENERAL CONTACT INFORMATION

\*Rotary district number \_\_\_\_\_

\*Interact club name \_\_\_\_\_ Founded on \_\_\_\_\_  
(date) (name of month) (year)

\*Interact club base (check one):  School  Community

\*In what language does the Interact club prefer to receive correspondence? (check one):

English  French  Italian  Japanese  Korean  Portuguese  Spanish

City \_\_\_\_\_ \*State/Province \_\_\_\_\_ \*Country \_\_\_\_\_

Interact club email \_\_\_\_\_ Interact club website \_\_\_\_\_

## INTERACT ADVISER INFORMATION

An Interact adviser may be a Rotarian, a school faculty member, or another adult who works with the Interact club. Although several people may serve in this role, Rotary International requires only one person, preferably a Rotarian, to be reported as an adviser each Rotary year (1 July – 30 June).

\*First name \_\_\_\_\_ \*Last/Family name \_\_\_\_\_

\*In what year(s) will this adviser serve? (check all that apply):  Current Rotary year  Next Rotary year  
 Year following next Rotary year

\*Is the Interact adviser a Rotarian?  Yes  No If yes, share your membership ID number if known: \_\_\_\_\_

\*Interact adviser's email \_\_\_\_\_

(Enter the email address associated with your [My Rotary](#) account or your individual email address. Do not use a shared or club email address.)

\*City \_\_\_\_\_ \*State/Province \_\_\_\_\_ \*Country \_\_\_\_\_

\*In what language does the Interact adviser prefer to receive correspondence? (check one):

English  French  Italian  Japanese  Korean  Portuguese  Spanish

Personal data you share with Rotary will be used only for official Rotary business. The personal data you provide will primarily be used for Interact club-related activities and will be shared with your sponsoring Rotary club and district officers and their delegates. Personal data collected on this form is subject to Rotary's [Privacy Policy](#). By signing below, you agree to share the contact information you provided above with Rotary International and accept Rotary's Privacy Policy.

\_\_\_\_\_  
 \*Interact adviser's name (printed)

\_\_\_\_\_  
 \*Interact adviser's signature

## INTERACT CLUB MEMBER INFORMATION

Please do not report Interact club members or officers to Rotary International. If any Interactors would like to register their Interact participation with Rotary International, they can report it, with the permission of a parent or legal guardian, through My Rotary when they are age 16 or older.

## SPONSOR(S)

Active and meaningful sponsorship by a Rotary club or clubs is necessary for success. Interact clubs may be sponsored by one to three Rotary clubs within the boundaries of the district in which they are located; district governors must approve in writing any additional Rotary club sponsors after carefully considering whether it is in the best interest of the Interact club. List all sponsor clubs and provide the names and signatures of the president of each.

By signing below, I affirm that I understand and accept the provisions of the [Policy Related to Interact](#) and the [Standard Interact Club Constitution](#) and [Recommended Interact Club Bylaws](#). I agree to mentor club members, guide them in service, and ensure that Rotary receives club contact information annually.

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\*Rotary club name

\*President's name (printed)

\*President's signature

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Rotary club name

President's name (printed)

President's signature

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Rotary club name

President's name (printed)

President's signature

## DISTRICT GOVERNOR'S ENDORSEMENT

By signing below, I approve the establishment of the Interact club. I will support and promote the club, connect its members with other clubs, and include its members in district service and training events. I will consider appointing a district Interact committee chair to strengthen connections between Interact and Rotary.

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\*District governor's name (printed)

\*District governor's signature