Biz Gen Membership Application

***Part I: Applicant information***

|  |  |
| --- | --- |
| Name: | Title: |
| Company: | Years in Profession: |
| Cell: | Work Phone: |
| Email: | Website: |
| Business Address: |
| City/State/Zip: |
| Please describe the services you provide: |

***Part II: Please answer the following questions***

Do you currently belong to other networking groups? If so, which?

What do you expect to contribute to the group?

What do you expect to receive from the group?

Are you able to commit to bi-weekly meetings and three Face to Face meetings per month? If unable to attend, can you send a representative in your place **(our attendance policy requires that you do not miss 4 meetings without a sub within a six-month period).**

***Part III: Application Process***

Please make a check out payable to **Stella Budala, Secretary Treasurer** for $250 for our annual membership fee. If you are not accepted at this time, the check will be returned. As part of the application process, you will be interviewed by group members before a decision is made.

***Part IV: Commitments – By signing this application you accept the following terms***

-I will be truthful with members and their referrals

-I will follow up on the referrals I receive

-I will live up to the ethical standards of my profession

-I will display a positive and supportive attitude

-I will contribute to the success and growth of the group

Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_