

MEMBERSHIP APPLICATION

Personal Information	
Applicant's Name:	
Company Name:	
Address	
City/State/Zip	
Website	
Email	
Contact Number	
Business Information	T
Physical Address	
Business Phone	
Business Email	
Products/Services	
Being Offered:	
Main Industry	
Other Information	
How did you hear abou	ut us?
groups.	ganizations in which you are a member including other network groups or civi
What skills do you hav	e that may help you add value to this organization?
Diagram and the extent areas	
Please read the statement 1. Membership to this	nts below: s organization requires that you miss no more than 12 meetings per year.
2. Membership fees in	nclude: \$50 one-time application fee, a \$125 annual membership fee and luces which covers the cost of your meal and secures meeting location.
3. When bringing a gu	est, members are prohibited from bringing anyone who may conflict with
	f you are unsure, contact the Board prior to inviting your guest.
•	red to log referrals and close of business in the RACOB (Referrals and Close of
Business) tracking s 5. You acknowledge tl	
_	hat you may not bring a lawsuit or claim of any kind against Business Network and its agents, servants, employees, contractors, officers, managers,
	ccessors, assigns, subsidiaries and/or affiliates for the damages incurred or
	on your behalf or on behalf of your agents, assignees, heirs or legatees,
	legitimate membership action or the enforcement of the bylaws of the
organization by any	lawful party of BNA. Should you bring such a lawsuit or claim in violation of
	u agree that you shall be liable to any defending party for any and all
reasonable attorne	ys' fees and expenses that may be incurred in defending against such claims.
By signing below, you ag	ree that all information provided above is accurate to the best of your
	agree to the terms as mentioned above and will unhold our Constitution and

Applicant's Signature Date

ByLaws.