

TOOWOOMBA BUSINESS NETWORKERS INC.

MEMBERSHIP APPLICATION FORM

PART 1 - Personal Details

Please print clearly...

Application date:	
Business name:	
Applicant name:	
TBN business category:	
ABN/ACN:	
Business location:	
Business contact phone:	
Contact mobile:	
Contact email:	
Billing email:	
Web site:	
Postal address:	
TBN sponsor name:	

Describe the nature of your business including your nominated business category:

PART 2 - Payment Option:

The first monthly membership fee and joining fee are due on acceptance. Payment by:

- EFT Transaction in the sum of \$ ____ Toowoomba Business Networkers (Remittance Attached)
- Cheque payable in the sum of \$ ____ to Toowoomba Business Networkers (Cheque Attached)

PART 3 - References and Background Information

Background Information:

Please fill out this questionnaire. *This information will be kept confidential to TBN Management Team.*

Business structure: Is your business a...

- Sole Proprietorship
- Partnership
- Corporation
- Non-for-Profit Corporation

What is your position in the business: I am a...

- Owner
- Partner
- Corporate Officer
- Manager
- Sales
- Independent Distributor

Do you work in the business full-time? Yes No

How long have you been with the business you are representing? _____

Does your business require: (Please tick and complete what is relevant)

- Licensing (please provide registration number): _____
- Certification (please provide title): _____
- Accreditation (please provide title): _____
- State or other board exams (please provide title): _____
- Continuing Education (please state frequency): _____
- Bonding (bonding company name): _____
- Other (please specify): _____

With what other business are you presently connected?

Do you currently have membership in another networking organisation? Yes No

If yes, please specify which organisation(s):

Referee Information:

Please provide names and phone numbers of clients/business associates we may contact.

Contact name	Business name	Phone

PART 4 - Terms Of Applicant's Acceptance

I agree to adhere to the following:

1. To actively participate in promotionals: Two 30 second promotionals weekly and 10 minute presentation as rostered.
2. Provide sufficient number of business cards for the other Members.
3. Use my best efforts to generate leads and referrals for the other Members.
4. Adhere to all policies in the Member Handbook.
5. Adhere to the Attendance Policy of 8 absences in a 6 month period.
6. I acknowledge that Forfeiture of Membership constitutes either violations of attendance policy, delinquent fees (delinquency occurs at end of second meeting of each month), representing, or promoting anything other than the business listed on my Member Application during weekly programs and/or unethical business practices.
7. I acknowledge that my Application is not complete unless approved and accepted by the Executive of Toowoomba Business Networkers. Toowoomba Business Networkers reserve the right to revoke this agreement at any time where member's actions are deemed detrimental to Toowoomba Business Networkers ability to exchange and generate quality leads and referrals or adversely effect the dynamics of Toowoomba Business Networkers ability to function.
8. I acknowledge that **all fees are non-refundable** and that membership is not transferable.

I acknowledge that I have read, understood and agree to the above and submit this application for a listing within Toowoomba Business Networkers.

Signature: _____

Dated: ___/___/___

Management Team Use Only

Verified Information: Yes No

Verified Referees: Yes No

Application Accepted: Yes No

Management Team Representative: _____

Management Team Signature: _____

Dated: _____