

APPLICATION FOR MEMBERSHIP



Please print clearly and complete all sections.

If you need more room for filling out the form, please feel free to attach an additional page to your application.

Applicant's Name:	Business Name:
Business Street Address:	
Business City & Zip Code:	
Business Website:	Business Email:
Business Telephone:	Business Fax:
Year business began:	Who referred you to our network group?
<p style="text-align: center;">Which of the following applies to you? Please explain how.</p> <ol style="list-style-type: none"> 1. Do you own, either in whole or in part, an active business for profit? 2. Do you assume a level of responsibility, authority, care and interest in the operation, improvement, and growth of a business that is akin to that of an owner? (e.g., the general manager of a restaurant). 3. Are you an independent contractor who is self-directed and whose compensation depends on the services or products that you provide to clients? (e.g., real estate agent). 4. If none of the above applies to you, describe the key responsibilities and decision-making authority you have in your job, including what your superiors expect from you. How would these make you a good fit with the owners and managers that make up the majority of 07424 members? 	
<p>In order to really get to know each other and promote each other's businesses well, we ask members to commit to meeting every other Wednesday PROMPTLY at the stated time, attending as many meetings as possible. Do you have any reason to believe that you cannot live up to this expectation?</p>	
<p style="text-align: center;">What do you hope to get out of joining and participating in 07424 Network?</p>	
<p style="text-align: center;">Do you believe that you have something helpful, special, unique, etc. to contribute to the group? What would that be?</p>	

07424 NETWORK FOR BUSINESS

163 East Main Street, # 272
Little Falls, NJ 07424

Application for membership in the 07424 Network for Business is voluntary and by invitation only. Completion of this application does not guarantee acceptance or membership. The Board of Directors of 07424 Network for Business is solely responsible for deciding which applicants may or may not be members.

Applicants further understand that if accepted, the organizations Board of Directors may revoke this membership at any time in accordance with our Bylaws and our Rules of Operation.

By signing this application, you agree to make your self available as needed for the interviews required to complete the application process in an expeditious manner. You also agree that, if accepted, your membership will not become active until dues are paid in full and you have received your membership kit.

You further agree to abide by all of the organization's Bylaws and Rules of Operation.

All decisions of the Board of Directors are final and cannot be appealed.

Signature _____

Date _____

PLEASE DO NOT WRITE BELOW THIS LINE

Chairman

Accept Decline

Signature _____ Date _____

Comments:

Vice-President

Accept Decline

Signature _____ Date _____

Comments:

Treasurer

Accept Decline

Signature _____ Date _____

Comments:

Secretary

Accept Decline

Signature _____ Date _____

Comments:

Response Sent on _____ by _____

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