

Date: _____

Chapter Name: _____

Applicant's Name: _____

Business Name: _____

Business Address: _____

City, ST Zip: _____

Business Phone: _____

Mobile Phone: _____

Website: _____

Email: _____

APPLICATION FEE:		\$ 199.00
PARTICIPATION FEES (Pick One):		
Option 1 \$	 One Term Membership	\$ _____
Option 2 \$	 Two Term Membership	\$ _____
TOTAL ENCLOSED:		\$ _____
Contact the Chapter's Secretary/Treasurer for payment options		
APPLYING FOR:		
Industry: _____		
Classification: _____		
Sponsor's Full Name (Must be a BNI Member)		

1. Experience in Professional Classification (be specific): _____
2. Length of time in Professional Classification: _____
3. Education background in Professional Classification or Degrees, current Licenses or Credentials required to perform in Professional Classification (list school/ state and/or business/state): _____
4. Has your professional license ever been revoked or suspended? ☐ Yes ☐ No If yes, please provide details: _____
5. Is the Professional Classification under which you are applying for membership your primary occupation? ☐ Yes ☐ No

1. Are you able and willing to make the commitment to arrive at the weekly meetings on time and stay through the 90 minutes, attend the Member Success Program and do you agree to abide by the BNI Member Policies, Guidelines and Code of Ethics? ☐ Yes ☐ No
2. Are you willing and able to send a substitute if you are unable to attend a meeting? ☐ Yes ☐ No
3. Are you willing and able to bring referrals and/or visitors to this chapter? ☐ Yes ☐ No
4. Have you ever been a member of a BNI chapter? ☐ Yes ☐ No If yes, please provide details: _____
5. Do you belong to other networking organizations? ☐ Yes ☐ No If yes, please list: _____
6. Have you ever been convicted of a felony? ☐ Yes ☐ No If yes, please provide details and year: _____

VI. BNI CODE OF ETHICS

Upon acceptance to BNI, I agree to abide by the following Code of Ethics during the tenure of my participation in the organization.

1. I will provide the quality of services at the price that I have quoted.
2. I will be truthful with the members and their referrals.
3. I will build goodwill and trust among members and their referrals.
4. I will take responsibility for following up on the referrals I receive.
5. I will display a positive and supportive attitude.
6. I will live up to the ethical standards of my profession.

Professional standards outlined in a formal code of conduct for any profession supersede the above standards.

VII. APPLICATION PROCESS

1. Prospective members must have a sponsor. Prospective members must complete this application and submit it to the Membership Committee for review.
 2. The Membership Committee will review your application and inform you of your acceptance or non-acceptance.
 3. The Membership Committee notifies the President.
 4. The President announces new members at chapter meeting following acceptance by the Membership Committee and receipt of payment.
 5. Upon acceptance, you are required to attend the BNI Member Success Program.
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VIII. BUSINESS REFERENCES

1. Name: _____
Position: _____
Business: _____
Phone: _____ Email: _____
Business Relationship: _____
 2. Name: _____
Position: _____
Business: _____
Phone: _____ Email: _____
Business Relationship: _____
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IX. MEMBERSHIP COMMITTEE USE ONLY

Date Approved/Declined: _____ Vice President's Signature: _____

Date Applicant Notified: _____ VP Print Name: _____

Notification to President: ☐ Accept ☐ Decline