Mankato Business Networking

MEMBERSHIP APPLICATION

I. BASIC INFORMATION

Date:

Applicant's Name: _____

Business Name: _____

Business Address: _____ City, ST, Zip: _____

Business Phone: _____ Mobile Phone: _____

Website: _____ Email: _____

II. MEMBERSHIP OPTIONS

APPLYING FOR:

Industry: _____

Classification: _____

Sponsor's Full Name: _____

III. EXPERIENCE & CREDENTIALS

NOTE: You may attach a resume or biography for additional information.

1. Experience in Professional Classification (be specific):

   _____

   _____

   _____

2. Is the Professional Classification under which you are applying for membership your primary occupation? ☐ Yes ☐ No

IV. STANDARDS & EXPECTATIONS

1. Are you able and willing to make the commitment to arrive at the weekly meetings on time and stay through the 90 minutes, New Member Orientation? ☐ 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. Do you belong to other networking organizations or BNI chapters? ☐ Yes ☐ No If yes, please list:

   _____

5. Have you ever been convicted of a felony? ☐ Yes ☐ No If yes, please provide details and year:

   _____

VI. 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.

V. TERMS & CERTIFICATIONS

By submitting this application, you agree to receive communications from or relating to Mankato Business Networking, and further that Mankato Business Networking may share your information and any other information and material you provide with other Mankato Business Networking members, affiliates, vendors, and their parties in order to provide you services as a Mankato Business Networking member.

ARBITRATION. All disputes arising out of or relating to this Agreement to the members participation in Mankato Business Networking shall be resolved by binding arbitration in accordance with the laws of the State where the applicant's Mankato Business Networking Chapter is located. The Arbitration shall be subject to the Rules of the American

Arbitration association. The Clause encompasses any and all disputed as well as members, provided that the disputes pertain to membership or participation in Mankato Business Networking.

LIMITATIONS OF LIABILITY. Notwithstanding any other provision of this Agreement, any liability to you involving Mankato Business Networking for any clause whatsoever arising out of or related to this Agreement and/or membership or participation in Mankato Business Networking, and regardless of the form of action, will at all times be limited to the amount of the annual membership fee paid by you for membership in Mankato Business Networking. Except in Jurisdictions where such provisions are restricted, in no event will there be any liability to you or any third person for any indirect, consequential, exemplary, incidental, special, or punitive damages. No actions hereunder may be commenced unless brought within one (1) year of accrual.

TERM. All term fees are prorated from the application date. Applications dates between the 1st and the 15th of the month shall begin their term on the 1st of the month. Applications dates after the 15th of the month shall begin their term on the 1st of the following month. Terms run on the calendar year from January 1st to December 31st.

CERTIFICATION. I hereby declare and certify that all statements contained in this application and any accompanying documents are true and correct, and that any misrepresentation or dales statement may be grounds for rejecting my application or, if discovered after my application has been accepted, subject me to immediate termination at Mankato Business Networking's discretion without any reimbursement. I further understand that my membership is conditional and I agree, accept and will abide by all the terms and conditions set forth herein those contained with the Mankato Business Networking Member Policies, Guidelines, and Code of Ethics, all of which I have had the opportunity to review upon request or received upon induction. I acknowledge that breach of these terms, conditions, and policies shall be grounds to terminate my membership. I understand and agree that UPON ACCPETANCE, FEES ARE NON_REFUNDABLE WITHOUT EXCEPTION.

VIII. BUSINESS REFERENCES

1. Name: _____

   Position: _____

   Business:_____

   Phone: _____Email: _____

   Business Relationship: _____

2. Name: _____

   Position: _____

   Business:_____

   Phone: _____Email:_____

   Business Relationship: _____

ONE TERM MEMBERSHIP FEE:	$300.00
TOTAL ENCLOSED = Contact the Chapter's Secretary/Treasurer for payment options	**$**

X. APPLICANTS SIGNATURE

_____

APPLICANT'S SIGNATURE DATE PRINT NAME CLEARLY

IX. MEMBERSHIP COMMITTEE USE ONLY

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

Date Applicant Notified: _____ VP Print Name: _____

Notification to President: ☐ Accept ☐ Decline