**
Venture Networkers** Membership Application

**Personal Information:**

Name:

Business Name:
Phone Number:

**Address:**

Home address:

Business address:

**Business Category:**Business Website URL:

Business Facebook URL:

Linked-In URL:

**Business References:**
For reference please list three Contacts of people you have done business with
Include name and phone or email contact info:

1)

2)

3)

How long have you been in your current job position?

Why do you want to join our group?

Who from our group is sponsoring you to join Venture Networkers?

What other professional organizations do you belong to? (for example: Chamber of Commerce, BNI, Rotary Club, etc.)

If you are a member of another professional organization, what would you say your level of participation is in that group?

If you were to join our group, would you be interested in taking a more active role within the group? This could be some thing as simple as a time keeper to management team (President, Vice President, Treasurer).

Upon signing this application, you are giving the Membership Committee permission to contact your listed references. Once that is done you will be contacted about doing an interview*/*step two of our application process.

Signature of Applicant:

Date:

Signature of Applicant's Sponsor:

Date:\_

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**Membership Fees: Application Fee: $30 First Year Fee: $120**

**Total Amount Paid:**

**Attendance Policy** If you are unable to attend a meeting, it is highly encour aged that you find a substitute to talk about your busi ness. If you have a substitute you will not be marked down as absent. Each quarter you are allowed 3 unexcused absences, After the third absence your seat will be available to be filled by someone else. A member may take up to a 6 week leave of absence for medical reasons. However, this must first be approved by our President and Membership Team. During this time their position will be maintained within our group.

**Payment Method:** *(Check only please, checks can be made payable*

*to Venture* N*etworkers)*

\*After the First Year of Membership fees are $30

quarterly. \*

**Applicant Signature:**

**Date:**

**President Signature:**

**Date of Approval**