LEAP Business Networking

Membership Application

Your membership application will be reviewed and voted on by the Organization Board.

We reserve the right not to grant membership & membership is a semi-exclusive position.

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Business: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Cell: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Business: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Business Category: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dates attended: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

One-on-ones: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Guests: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I hereby agree to the policies of the LEAP Business Referral Group by attending meetings, giving referrals, bringing guests, and supporting the group.

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Approved: Date:

LEAP Business Referral Group

Policies

1. Attendance: Members should attend every meeting possible. Maintain a 60% attendance per quarter. If you miss 5 consecutive meetings, your position will become available, unless absences are approved by the Organization Board. You may send someone in your place to represent only your company.
2. Representation: You may only represent one company.
3. Membership: To become a member, you must follow the rule of 3’s. You must visit 3 times, bring 3 guests, and have 3 member 1-on-1’s, one of which must be with a member of the organizational board. Upon approval by the organizational board, the member must pay the first annual pro-rated membership dues of $100.00, and all future dues on the beginning of July each year. Membership is an exclusive position, unless agreed to by the conflicting members and approved by the board. Maximum of only 2 members with same position are allowed
4. Participation: Each member should actively participate by scheduling 1-on-1’s with other members. Each member should participate by bringing guests. Each member should participate by promoting other members on social media (Facebook, Linked In, and Meetup)
5. Disclaimer: I understand that as an applicant for membership to the LEAP Business Referral Group (LEAP), that membership is not a property interest. I further understand my membership may be terminated for any reason with or without cause, and should my membership be terminated, I acknowledge and agree that neither me nor a business I represent will be reimbursed any money, compensated for time, or compensated for services or products provided to LEAP unless otherwise agreed in writing. I agree to hold LEAP, its Board and its members harmless for any claims resulting from my dismissal or activities related to LEAP.

Signature: Date: