

COEUR D'ALENE POWERTIPPS

Member Application

WEB CONTENT REVISED: January 23, 2010

APPLICATION PROCESS

(Read Carefully)

1. A prospective member may attend **two** meetings as a visitor. At the second meeting, the applicant completes and submits a **MEMBERSHIP APPLICATION**, along with the \$20.00 initiation fee, * \$50.00 annual membership fee and \$10.00 one-time fee for webmaster listing on the PowerTipps web page (**\$80.00** value) to the board Treasurer.
2. The Membership Committee completes the screening process and notifies the prospective member of acceptance or non-acceptance before the next scheduled meeting.
3. The Membership Committee notifies the President.
4. The President announces the new members at the next scheduled meeting following the acceptance of the Membership Committee.

* Annual membership fee is pro-rated – amounts determined by the Treasurer.

Please attach additional pages if desired.

Your Name:	<input type="text"/>	Business Phone:	<input type="text"/>
Business Name:	<input type="text"/>	Home Phone:	<input type="text"/>
Business Address:	<input type="text"/>	Fax#:	<input type="text"/>
	<input type="text"/>	Email:	<input type="text"/>
City:	<input type="text"/>	State:	<input type="text"/>
		Zip:	<input type="text"/>

Sponsor's Name:

Suggested Business Category:

1. Please describe your **company**, it's **products** or **services** you will represent as a **PowerTipps** member and your **experience** in the field/occupation:

2. Educational Background in your field/occupation or Degrees, Licenses or Credentials required to perform in field/occupation:

3. Is the occupation under which you applied for membership a full or part-time occupation? (continued on Page 2)

Full time: Part time:

4. How Long have you been with the company you are representing?

5. Are you able and willing to make the commitment to arrive at our weekly meetings on time and stay to the end, and are you willing and able to abide by **POWERTIPPS** rules and procedures?

Yes: No:

6. Is there an individual in your company who would be willing and able to attend meetings on your behalf if you should be unable to attend?

Yes: No:

7. What do you expect to be able to contribute to the chapter?

8. What is your ability to bring referrals or guests to meetings?

9. Are you a member in other networking organizations?

Yes: No:

10. List other organizations you belong to:

BUSINESS REFERENCES

Please list two business references:

1. Business Name:

Contact Name: Position:

Phone:

Describe relationship:

2. Business Name:

Contact Name: Position:

Phone:

Describe relationship:

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NOTE: You may attach additional information (e.g. resume, biography, etc.) if desired.

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UPON ACCEPTANCE, FEES ARE NON-REFUNDABLE WITHOUT EXCEPTION
