



The Biz-Link Application for Membership

Your Name _____

Today's Date _____

Business Name _____

Business Address _____

Type of Business _____

Bus. Anniversary: Month _____ Year _____

Phone # Cell _____

Business _____

Fax _____

Home _____

Business Email Address _____

Personal Email Address _____

Website: _____

Birthdate: Month _____ Day _____

Married? Yes No

What do you feel is your life's greatest accomplishment?

Hobbies and Personal Non-Business Interests _____

Community Service/Civic Groups _____

References: Name, Phone, Address

1. _____

2. _____

What types of professions are in your complimentary circles?

What do you hope to accomplish by being a member of our group?

Is this your Full time job or Part time?

Are you in another Referral/Leads/Advisory Group, if so which one? **Y N**

How often does this group meet? _____

List your business experiences (both as owner and employee) that you feel would make you a valuable member of the group:

I have read The Biz-Link Members Policies and agree to abide by them.

Signature:

Applicant

Date

The policies of The Biz-Link allow for just one representative of each business category. Your application will be reviewed to ensure there is no conflict of interest with an existing Biz-Link member. The group leadership will inform you when your application has been accepted.

Membership dues are \$60 per year. Renewal payments are due in March. If you join in a month other than March, membership dues are pro-rated at \$5 a month. Dues are non-refundable. Our leadership team consists of President, Vice-President and Sec/Treasurer. Leadership Committee members are selected by total membership vote every 12 months.

Please make check payable to: The Biz-Link