

NBG - Membership Application

To be completed by new members



Northumberland
Business Group

Part 1 (please answer all questions)

Membership date: _____ Bus phone: _____ Cell ph: _____
Applicant's name: _____ Fax: _____ Email: _____
Business name: _____ Website: _____
Business address: _____
City: _____ Prov: _____ Code: _____

Annual Membership Fee: \$200.00

Describe your product or service (be specific) _____

Category applied for: _____ Sponsor's name: _____

Approved by Membership Committee: _____

Authorized Signature: _____

Type of Payment (circle one): **Personal Cheque** **Company Cheque** **Cash**

UPON ACCEPTANCE TO NBG, FEES ARE NON-REFUNDABLE WITHOUT EXCEPTION

GENERAL POLICIES

1. Only one person from each professional discipline, trade or business is permitted to join NBG. Membership Committee has final authority relating to classification conflicts.
2. The weekly meetings last for 90 minutes. Members need to arrive on time and stay for the entire meeting.
3. Attendance is critical to the group. If a member cannot attend, he/she may send a substitute. This will not count as an absence. A member is allowed four absences every six months. After four absences, the member's classification is subject to being opened by the Leadership Executive Team or Membership Committee.
4. Members are required to bring bona-fide referrals and/or visitors to the meeting.
5. Visitors may attend meetings up to two times.
6. Speakers must present a door prize. Only members bringing a visitor or a referral are eligible for this door prize.
7. There are no leaves of absence except for medical leaves. Members may take up to eight weeks medical leave with the Membership Committee's prior approval if their fees are pre-paid for that period of time and they attempt to have someone fill in during their leave.
8. It is the member's responsibility to file concern with the Membership Committee if a visitor in any way conflicts with their classification. This should be done before the visitor is approved for membership. If there are no complaints, the Membership Committee will "assume" their consent.
9. Members who wish to change their classification must submit a new membership application and get approval from the Membership Committee for the classification change.
10. In case of problems with a member, Membership Committees may, at their sole discretion, put a member on probation relating to the member's business practices or commitment.
11. Memberships may be revoked for failure to comply with the policies and/or code of ethics of NBG. Membership Committee may revoke memberships. In the absence of a Membership Committee, the Leadership Executive Team may fulfill that responsibility.
12. If the Leadership Executive Team members fulfill all responsibilities throughout their term, then they will receive as consideration an exemption of dues during their tenure as a Leadership Executive Team Member. order to hold a position.
13. In the absence of a Membership Committee, the Leadership Executive Team may act as an ad hoc Membership Committee until one is established.
14. All NBG membership lists are for the purpose of 'giving' referrals and not for soliciting (i.e., email, direct mail, etc) members without their prior approval.

UPON ACCEPTANCE TO NBG, FEES ARE NON-REFUNDABLE WITHOUT EXCEPTION

APPLICATION PROCESS

1. Describe your experience in your field/occupation (be specific): _____

2. Describe your educational background in your field/occupation. Include degrees, licences or credentials required to perform job:

- 1. Is the occupation under which you are applying for membership, a full or part-time occupation? Full-time Part-time
- 2. How long have you been with the company you are representing? _____
- 3. Are you willing & able to commit to arriving at the meeting on time (7AM) and staying throughout the full 90 minute meeting? _____
- 4. Are you willing and able to comply with NBS's policies and procedures? _____
- 5. Will you find and use a substitute person to attend a NBS meeting on your behalf when you are not able to attend? _____
- 6. What do you expect to contribute to the Chapter? _____

7. What is your ability to bring qualified referrals, introductions or visitors to the meeting? _____

8. Do you belong to other networking organizations? _____ If yes, please list the organization(s): _____

9. All members are expected to contribute to the management of the group. What position interests you most? (circle one)
President Vice President Secretary/Treasurer Membership Committee
Visitor Host Event Coordinator Education Coordinator Mentor

BUSINESS REFERENCES

NAME: _____ POSITION: _____
BUSINESS NAME: _____ PHONE: _____ FAX: _____
BUSINESS RELATIONSHIP (describe): _____

NAME: _____ POSITION: _____
BUSINESS NAME: _____ PHONE: _____ FAX: _____
BUSINESS RELATIONSHIP (describe): _____

Applicant's Signature: _____ **Date:** _____

MEMBERSHIP COMMITTEE USE ONLY

MEMBER: _____ Verified Information & References: Yes or No
Induction date: _____
Comments: _____

RECOMMENDATIONS TO PRESIDENT

ACCEPT DECLINE Category Assigned by Membership Committee: _____

Comments: _____

If declined, was there a conflict with another member's category? Explain: _____

Authorized Signature (Membership Committee): _____ Date: _____