Membership Application

Guests are welcome to come to two meetings before submitting application Complete this form and return to VAN leadership by your third meeting



Contact Information

Signature:_

	ACTION NETWORK
	Business Category:
Company:	Phone:
Address:	City: Zip:
	Email:
Sponsor Name/Referral Source:	
Dues Information	
First quarter dues and new member fee a Checks will be held until the applicant is Quarterly dues (first quarter is prorated New member application fee (one-time f Showcasing your information on our wel	s approved, dues and fees are non-refundable.) - \$60 ee) - \$200
Pillars of Success - Membership Agre	ement (Please Initial)
Attendance - I will arrive on time an	d stay for the entire meeting. I will not miss more than three
meetings in a quarter, and understand that e	excessive absences or tardies may cause me to lose my position in the
group. If I am not able to attend a meeting I	will make every effort to send a substitute as described in the VAN
Bylaws.	
Meeting Participation - I will partic	ipate in meeting discussions and be mindful of the length of my
presentations. I will respect the agenda, the	time keeper and the alarm by not speaking beyond the allotted
time.	
<u> </u>	guests to our meeting who I believe will be an asset to our group
, e	c for possible referrals for other members and I will ensure that
those referrals are qualified. I will attend all Responsibility - I will schedule my n	special VAN gatherings if I am able. ew member training meetings within 30 days. I will fulfill any
assigned temporary role, and support the qu	,
	AN is looking for qualified professionals and certify that I have all
licenses and insurance required in my indus	try. I am a full time professional in my category and it is my primary
source of income. I will refrain from recruit	y members of VAN to join my business. I will pay my quarterly dues
at the first meeting of each quarter. I agree t	o conduct myself in a positive and professional manner during
meetings while adhering to all VAN Bylaws, I	Rules, and Procedures. Lastly, I understand that I am responsible for
my seat and category and that they are non-t	transferable.
Applicants please have 1 on 1 meetings wand have them sign below:	vith two non-leadership members, besides your sponsor,
Member Name:	Member Name:
Member Signature:	Member alguature

_ Date:_



MEMBER BIO

Member Name:	Business Name:
Profession:	Years in Business:
Previous Types of Jobs:	
Birthday:	
Optional:	
Spouse:	
Children:	
Pets:	
Hobbies:	
Activities of Interest:	
City of Residence:	How Long: