



TEAMMATE APPLICATION

APPLICANT INFORMATION

Chapter Location:		Application Date:	
Name (Last, First):			
Business Name:			
Business Address:			
City:	State:	ZIP Code:	
Business Phone:	Fax:	Cell (Optional):	
E-mail Address:		Web Address:	
How Did You Hear About PNG?			
Describe Your Product or Services (be specific):			

YEARLY APPLICATION DUES

\$200 Per Year. Non-refundable without exception.		<input type="checkbox"/>	Teammate Renewal
Paid date:		Paid to:	

APPLICATION PROCESS

1. A prospective member may attend two meetings as a visitor.
2. Prospective members then complete this application and submit their dues to an officer of PNG for review.
3. The membership committee will contact the prospective member to initiate the interview process.
4. PNG will then notify the prospective member of acceptance or non-acceptance before the next meeting.

PNG QUESTIONNAIRE

1. Are you able and willing to make the commitment to arrive at our bi-weekly meetings on time and stay throughout the 60 minutes? _____
2. Are you willing to abide by PNG Policies, guidelines and ethical standards? _____
3. Do you belong to other networking organizations? _____ If so, please list _____
4. If you are not able to attend, do you plan on notifying a PNG officer? _____
5. In your absence are you able to send a representative of your company in your place? _____

PNG ETHICAL STANDARDS

Upon my acceptance to the Professional Networking Group, I agree to abide by the ethical standards during my year-long participation in the organization. Please read and initial after each.

1. I will to live up to the ethical standards of my business. _____
2. I will to display a positive and supportive attitude with all PNG members. _____
3. I will to take responsibility for following up on the referrals I receive from PNG members. _____
4. I will to build trusting relationships between members and their referrals. _____
5. I will to be truthful with the PNG members and their referrals. _____
6. I will to provide a quality service at the price I have quoted. _____
7. I will invite two guests or referrals per month, or a combination of the two. _____
8. I agree that I will be reviewed on my performance on a quarterly basis. _____
9. I agree that my membership will be terminated after two unexcused or five total absences per membership year.

SIGNATURE

Applicant:
PNG Officer: