



Membership Application

Prospective BNG'ers must submit a completed application to the Chair of the desired group you wish to join, for consideration. Applications must be accompanied by confirmation of chamber membership. Applicants will be notified of acceptance or rejection as soon as possible.

BNG Chapter _____

PERSONAL INFORMATION

Applicant's Name (Last, First, Middle) _____

Business Name _____

Business Address _____

STREET

CITY

STATE

ZIP

E-mail Address _____

Web Site Address _____

Business Phone _____ Cell _____

Description of Business Type Including Major Products and _____

Services:

WILLINGNESS TO PARTICIPATE

BNG Members are expected to attend meetings and can lose their membership for excessive absenteeism.

Are you able and willing to make a commitment to attend our meetings twice a month? ____

If unable to attend, are there others in the firm you represent who will be able to attend in your place? ____

BNG members are expected to bring referrals for fellow members and are trained in doing so.

Are you willing to make a conscientious effort to bring referrals for fellow members? ____

BNG members are expected to help build their groups by inviting guests to the meetings.

Are you willing to make a conscientious effort to bring one guest each 6 month term? ____

If accepted to BNG, I agree to the BNG Policies and Procedures and the following code of conduct:

1. To attend meetings regularly and send a substitute when I cannot attend.
2. To learn about the products and services provided by fellow members and to promote fellow members by generating referrals.
3. To promptly follow up each referral and to treat all those referred with honesty and professional courtesy.
4. To honor all commitments made to fellow members and to maintain high professional and ethical standards
5. To support inter-chapter activities whenever possible and promote goodwill and understanding among chapter members and between chapters.
6. To learn to navigate ChamberRefer, to track referrals and one-to-ones

RESPONSIBILITY FOR DUE DILIGENCE

By signing below, I acknowledge and agree that I am aware that it is my responsibility to exercise due diligence in dealings with BNG members and that BNG cannot and does not legally endorse, warrant or guarantee the products or services offered by any of its members. I also waive and release BNG and the Southfield Area Chamber of Commerce and each of its officers, representatives, of any liability, claims or causes of action arising out of the actions or inactions of other BNG members causing harm or loss to me.

APPLICANT SIGNATURE _____ DATE _____