



# KCNG Membership Application

Our group allows only one representative from each field/profession/business to avoid any kind of competition between members. Please check our website ([www.KCNetworkingGroup.com](http://www.KCNetworkingGroup.com)) to see if anyone else represents your type of business. If not, make sure you have attended at least three meetings and then go ahead and submit this application to the Membership Chairman along with a check for your dues. Dues are \$60 annually and they are prorated during the year. Ex: If you are joining in January, submit a check for \$60. If you are joining in May, submit a check for \$40. The Membership Committee reviews all applications and will notify you as soon as possible; generally before the next meeting.

Applicant's Name: \_\_\_\_\_ Business Name: \_\_\_\_\_

Home Address: \_\_\_\_\_ Business Address: \_\_\_\_\_

City, St, Zip: \_\_\_\_\_ City, St, Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

You may only represent one business. Describe your product or service and be specific as possible. \_\_\_\_\_

What is your experience in your field? How long have you been in the business? How long have you been with the company you represent? \_\_\_\_\_

What is your educational background in your field? Degrees? Credentials? Licenses? \_\_\_\_\_

Is the business under which you are applying for membership a  full or  part-time occupation?

Have you participated in networking groups in the past?  Yes  No

Are you a member of another group presently?  Yes  No If Yes, please specify: \_\_\_\_\_

What do you expect to contribute to the group? \_\_\_\_\_

What do you expect to receive from the group? \_\_\_\_\_

## Business References (you can attach a resume or bio if you choose)

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Position: \_\_\_\_\_ Position: \_\_\_\_\_

Business: \_\_\_\_\_ Business: \_\_\_\_\_

Phone: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Email: \_\_\_\_\_

Are you willing to commit to attending a minimum of 75% of the regular weekly meetings?  Yes (You are allowed to miss 3 meetings in a quarter. It is recommended that if you miss a meeting that you send someone to represent you, if possible.)

Are you willing to commit to doing one-on-one meetings with members on a regular basis to learn more about how you can help their business grow and to let them know what type of referrals or strategic partners would benefit you?  Yes

A copy of our group's by-laws are available under *Forms* on [www.KCNetworkingGroup.com](http://www.KCNetworkingGroup.com). We suggest that you read this information before signing.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\* \* \* \* \*

**Membership Committee use only.**

Comments: \_\_\_\_\_  
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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
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Approved:  Yes  No If Yes, category: \_\_\_\_\_

\_\_\_\_\_  
Vice-president Membership's Signature

Revised August 2010