

WIN IV MEMBERSHIP APPLICATION

Date: _____

Name: _____

Company Name: _____

Email: _____ Website: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Phone: (work) _____ (cell) _____

Birthday (MM/DD): _____ Wedding Anniversary (MM/DD/YY) _____

The purpose of WIN IV is to support and assist each other in our sales and business development. We never compete with each other. Each member is allowed to represent only one service or product within WIN IV. Therefore, the category of membership to which you apply is the only business/service/product that you can promote within the group.

Please describe your service/product/business as fully as possible : _____

How long have you been in business? _____ Full time or part time _____

Which category of business do you wish to represent within WIN IV? _____

In what other networking groups are you a member? _____

Describe your involvement in the community/board of directors /etc.

Who referred you to WIN IV? _____

Note: A \$25 Membership Application Fee must accompany your application. You may pay on paypal or check. This fee is non-refundable. Annual dues are \$75.00. A pro-rata amount will be charged new members who join mid-year. You must attend two (2) meetings before you may apply for membership. Submit completed application and \$25.00 fee to: Gretchen Mahaffey - 2200 Greene Way, Louisville KY 40220 - 502-640-4673