

Northern Virginia Business Referrals Membership Application

Name _____

Meetings held on Tuesday mornings 7:00AM sharp at the designated location.

Members are expected to attend all meetings of the organization. Exceptions shall include absences due to business travel, vacation, and meetings with clients that cannot be accommodated at another time, and for sickness.

Business products or services to be used in Catalog:

_____ Category _____

_____ Company Information _____

Licenses and Professional Standing in your industry will be verified.

Members are expected to participate by bringing qualified referrals and visitors.

\$30 Membership Fee (prorated for six months) will be refunded only if applicant is rejected.

_____ Membership Chairman

_____ Sign _____ Date

Payment: Check # _____ Cash _____

Amount _____

_____ Sponsoring Member's Signature