

Applicant's Name: _____

Business Name: _____

Business Address: _____

Phone: _____ E-mail: _____

Describe Your Business: _____

Website Address: _____

Referred By: _____

A prospective member may attend **three** meetings as a visitor. They may then complete an application and submit it to the Membership Committee for review. The Membership Committee will complete the screening process and inform the prospective member of their status prior to the next meeting. The maximum number of members in the The Leading Edge is 25. Approved applicants will be placed on a waiting list from which a new member will be chosen based on the current needs of the group, not on a first come first serve basis. Those on the waiting list will be considered viable substitutes when current members are not able to attend a regular meeting.

Please Answer the Following Questions:

1. If your business has more than one area of concentration, what are they and which one will you be representing at the Leading Edge? _____

2. What experience do you have in your field? _____

3. Are you able and willing to make the commitment to arrive at our weekly meetings on time and stay throughout the 90 minutes, and are you willing to abide by the Rules of The Leading Edge? _____

4. What resources do you have that will enable you to bring qualified referrals or visitors? _____

5. Do you belong to any organized groups, referral or otherwise, where exclusivity is practiced? (Only one member for each business type) _____ If so, please list: _____

Business References:

Name of Business and contact: _____ Phone: _____

Name of Business and contact: _____ Phone: _____

As of September 15, 2006, no applicant for membership in The Leading Edge may already belong to, or current members subsequently join, any other referral, leads, or networking group where exclusivity is practiced. Failure to disclose any such membership may lead to termination of Leading Edge Membership.

THE ANNUAL MEMBERSHIP FEE IS PAID IN ADVANCE AND IS NON REFUNDABLE.

Your Signature _____ Date _____

For Office Use Only: Date of Acceptance _____ Amount of Dues Paid _____

Comments: _____
