

Business Builders 2012 Membership Application

PLEASE MAIL OR EMAIL APPLICATION TO Business Builders Network

APPLICATION INFORMATION

BUSINESS NAME _____

MAILING ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHYSICAL ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____ FAX _____ CELL _____

EMAIL _____ WEBSITE Http://www. _____

REPRESENTATIVE _____

BUSINESS DESCRIPTION _____

REFERRED BY _____

I would like to offer a member to member discount _____

Payment Method: (membership is effective upon receipt of payment. Nonrefundable)

Online Credit Card Payment

6- Months \$75.00 **1- Year \$125.00** **Renewal**

I have read and agreed to Business Builders Network terms of use, Business conduct and By-laws.

Signature: _____ **Date:** / / 2012

FOR OFFICE USE ONLY Member #

_____ Membership Date _____ Ambassador Mentor _____

Business Builders Network P. O. Box 109 Marietta, Georgia 30061