



Northwest Women's Network

MEMBERSHIP APPLICATION

NWN ADMIN USE ONLY:

Category: _____

Date Received: _____

Date Voted: _____

Date Notified: _____

Date: _____

Category: _____

BUSINESS INFORMATION:

Applicant's Name: _____

Name of Business: _____

Business Address: _____

City/State/Zip: _____

Phone: _____ Fax: _____

Cell: _____ E-mail: _____

How long in this business? _____

License number (if applicable): _____

Describe your product or services: _____

Education and/or background in this field: _____

Club memberships, organizations, and honorary societies: _____

Types of leads that would be helpful to you: _____

How did you hear about Northwest Women's Network Group? _____

PERSONAL INFORMATION:

Home Address: _____

Phone: _____ Cell: _____ Email: _____

Spouse's Name (if applicable): _____

Spouse's Occupation: _____

Children (Names/Ages): _____

Your Birthday: _____ Anniversary: _____ Spouse's B-day: _____

REFERENCES:

Name: _____

Address: _____

Phone: _____ Fax: _____ E-mail: _____

Relationship: _____

Name: _____

Address: _____

Phone: _____ Fax: _____ E-mail: _____

Relationship: _____

Name: _____

Address: _____

Phone: _____ Fax: _____ E-mail: _____

Relationship: _____

Please fill out and return to Northwest Women's Network, along with a check for \$125. Your Membership Application and fees may be hand carried to the next meeting you attend or mailed to Jody Serey, c/o SereyJones Publishers, 7413 W. Oraibi Dr., Glendale, AZ 85308.

Applicant Signature

Please attach your business card.