



## Lake Norman Executive Board

### Membership Application

Date \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Profession: \_\_\_\_\_

Business Address: \_\_\_\_\_

\_\_\_\_\_

Business Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Describe your Business/Product/Service: \_\_\_\_\_

\_\_\_\_\_

What do you expect to gain from the group: \_\_\_\_\_

\_\_\_\_\_

What do you expect to contribute to the group: \_\_\_\_\_

\_\_\_\_\_

Are you willing to make the commitment to attend the weekly meetings on time and stay throughout the entire meeting: \_\_\_\_\_

Referred By: \_\_\_\_\_

Annual membership dues: \$175

Payment type: \_\_\_\_\_ Check \_\_\_\_\_ Cash

Make checks payable to Lake Norman Executive Board

Memberships dues are non-refundable.

This is an invitation only organization. A prospective member may attend only two meetings as a visitor. The Lake Norman Executive Board will only accept one person per profession to join as a member.

This is a professional referral organization. We believe that our standards are of the highest order and your signature signifies your confidentiality pertaining to the information received about the members and their businesses.

Applicants Signature: \_\_\_\_\_

Please describe what your business does in 30 words or less:

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