



**Building business,
one relationship at a time!**

P.O. Box 433 Matthews, NC 28106



MEG Membership Application

Name: _____
(Last) (First)

Business Name: _____

Business Address: _____

Phone: _____ Mobile: _____

Position/Title: _____ Website: _____

Email: _____

Industry (general description for directory) _____

Specific industry description (to ensure no conflict with current members):

(Note: "Industry" must be applicant's primary occupation and source of income.)

Sponsoring Member: _____

Other Professional Memberships: _____

A MEG membership is occupied and in ownership of the individual rather than the company he or she represents. Should the individual leave the represented company, the company does not retain the right to replace the individual in MEG. Membership is not transferable.

1. Experience in Industry applied for _____

2. Educational background in Field/Occupation or Degrees/Licenses/Certification etc...

3. Describe your target client or typical client (e.g. what is your preferred referral?)

4. How long have you been with the company you are representing today?

5. What are your expectations on helping others in MEG with referrals and relationships?

3. *Have you ever been convicted of a felony? If yes, explain.*

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to membership, I understand that false or misleading information in my application or interview may result in my release from the group without refund.

I also understand that:

- Dues are \$280.00 annually and payable upon application approval.
- Membership is non-competitive. If employment changes, application for membership must be resubmitted.
- Members must attend at least 70% of regular meetings to retain membership.
- Regular meetings are held the second and fourth Wednesday of each month at 7:15am
- A limited basic background check will be completed for new applicants.

Applicant Signature

Date