

Professional Power Team

powerworking for success

Membership Application/Tracking Sheet

Name: _____

Business: _____

Industry: _____

Meeting Dates:

- 1) _____
- 2) _____
- 3) _____
- 4) _____

One On Ones: *Please note: at least 2 one on ones must be with someone on the membership committee*

- | | Name: | Date: |
|----|-------|-------|
| 1) | _____ | _____ |
| 2) | _____ | _____ |
| 3) | _____ | _____ |
| 4) | _____ | _____ |

Referrals:

- | | Referral given to: | Date: |
|----|--------------------|-------|
| 1) | _____ | _____ |
| 2) | _____ | _____ |
| 3) | _____ | _____ |
| 4) | _____ | _____ |

Guests: *Please note: To be counted toward membership, guests must be viable for membership*

- | | Name and Business/Industry: | Date: |
|----|-----------------------------|-------|
| 1) | _____ | _____ |
| 2) | _____ | _____ |
| 3) | _____ | _____ |
| 4) | _____ | _____ |

By applying for membership I'm acknowledging that I currently have, and will continue to maintain, all appropriate licenses, insurance, and certifications required for my industry. Furthermore, I understand that my membership is contingent on my continued attendance of PPT and maintenance of my membership. I understand that if I fail to attend a minimum number of meetings or maintain my membership as set out in the rules/guidelines I risk forfeiting my slot. In order to regain it I will need to complete a second application before it is filled by another applicant.

Signature: _____ Date: _____

* Eligible entries must be completed within a 6 month time frame.