



# DYNAMIC NETWORK ASSOCIATES

## Membership Application

Date: \_\_\_\_\_

Applicant's Name: \_\_\_\_\_

Business Names: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Business Fax: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Home Fax: \_\_\_\_\_

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

Sponsor's Name: \_\_\_\_\_

## Registration Fees

(Annual Membership and Registration Fees must accompany Membership Application)

Annual Membership Fee: \$120.00

Registration Fee: \$ 15.00

Total Fee Due: \$135.00

## Applicant Profile

1. How did you hear about DNA? \_\_\_\_\_
2. How long have you been with the company you are representing? \_\_\_\_\_
3. Is your current position full-time or part-time? \_\_\_\_\_

4. What is your experience in your present field or occupation? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
5. What is your educational background in your field or occupation (include degrees, licenses, credentials, etc.): \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
6. To what other networking organization do you belong? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
7. What sources will you use to bring qualified referrals and/or visitors to this DNA chapter?: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
8. Name and title of person representing your company if your cannot attend a weekly meeting: \_\_\_\_\_  
 \_\_\_\_\_

### **Business References**

1. Name: \_\_\_\_\_ Title: \_\_\_\_\_  
 Business: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-Mail: \_\_\_\_\_  
 Business Relationship: \_\_\_\_\_
2. Name: \_\_\_\_\_ Title: \_\_\_\_\_  
 Business: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-Mail: \_\_\_\_\_  
 Business Relationship: \_\_\_\_\_

**Upon acceptance for membership in the DYNAMIC NETWORK ASSOCIATES,  
 I agree to abide by the following code of ethics:**

1. I will conduct myself with the highest ethical, professional standards.
2. I will be truthful with each member and his or her referrals.
3. I will strive to build and maintain goodwill with each member with a positive and supportive attitude.
4. I will provide quality services at the quoted prices.
5. I will take responsibility to follow up on each referral received.

Signature of Applicant: \_\_\_\_\_