



4994 Lower Roswell Road
 Suite 11
 Marietta, GA 30068
 678.888.0200 • www.referrals4life.com

BNI Membership Renewal

As we approach your renewal anniversary, we want to thank you! Your hard work and dedication is an integral part of the success your chapter has shared this last year. We have enjoyed assisting you in building a successful referral network and anticipate great things from you and your chapter in the future.

Please understand that the Membership Committee of your chapter is required to approve all renewals.

Renewal Is Not Automatic

This renewal application along with payment of your annual membership fees should be submitted to the Sec/Treas of your chapter at least 30 days prior to your renewal date (see below). Your participation history will be reviewed by the Membership Committee when determining the status of your renewal. You will be notified of their decision prior to the next meeting.

Upon acceptance to BNI, I agree to abide by the following Code of Ethics during my participation in the organization:

1. I will provide the quality of services at the prices that I have quoted.
2. I will be truthful with the members and their referrals.
3. I will build goodwill and trust among members and their referrals.
4. I will take responsibility for following up on the referrals I receive and referrals I give.
5. I will display a positive and supportive attitude with BNI members.
6. I will live up to the ethical standards of my profession.

Note: Professional standards outlined in a formal code of ethics, supercede the above standards.

The BNI Regional Office must receive your application and fees prior to the date that your membership expires to avoid a \$20 late fee.

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Membership Renewal Application

Please print legibly, complete all sections, obtain Membership Committee approval and remit to the address above

Chapter Name	Today's Date	Renewal Date
Applicant's Name	Business Phone	
Business Name	Home Phone	
Business Address	Fax	
City, State, Zip	E-mail	
<input type="checkbox"/> Same products and/or services as original application <input type="checkbox"/> Make the following classification changes (be specific): <hr/> <hr/> <hr/>	Annual Membership Fee: \$355.00 1 Year renewal/ \$560.00 2 Year renewal (includes Member Success Program fee) We accept/select: <input type="checkbox"/> Check <input type="checkbox"/> Visa/Mastercard <input type="checkbox"/> American Express Account# _____ Exp. _____ Upon acceptance to BNI, I agree to abide by the BNI Policies and Code of Ethics. Member's &/or Name on card Signature: _____	

Membership Committee (MC) Use Only: Accept Decline (see other side for comments) Authorized Signature: _____

Upon acceptance, all fees are non-refundable without exception. \$20 fee if paid late.