

# BNI MEMBERSHIP APPLICATION

Region Name: BNI Ontario Golden Horseshoe/Niagara

## I. BASIC INFORMATION

Date Received: _____	Induction Date: _____
Chapter Name: _____	
Applicant's Name: _____	
Business Name: _____	
Business Address: _____	
City, _____	
Prov., _____	Postal Code: _____
Business Phone: _____	Mobile Phone: _____
Website: _____	
Email: _____	

## II. MEMBERSHIP OPTIONS

<b>APPLICATION FEE:</b>	<b>\$ 350.00</b>
<b>PARTICIPATION FEE:</b>	<b>\$ 750.00</b>
<b>TAX</b> (applicable to Fed. & Prov. Law)	<b>\$ 143.00</b>
<b>TOTAL ENCLOSED:</b>	<b>\$ 1243.00</b>

Chapter Meeting fees are separate from BNI membership fees.

**Type of Payment:** Personal Cheque  Company Cheque   
Credit Card  Cash

E-transfer to email : christel@bnigh.com

### APPLYING FOR:

Industry: _____
Classification: _____
Describe Your Product or Service (Be Specific): _____
Sponsor's Full Name (Must be a BNI Member): _____

**UPON YOUR ACCEPTANCE TO BNI, FEES ARE NON-REFUNDABLE WITHOUT EXCEPTION**

## III. EXPERIENCE & CREDENTIALS

 NOTE: You may attach a resume or biography for additional information.

1. Experience in Professional Classification (be specific):
2. Length of time in Professional Classification:
3. Education background in Professional Classification or Degrees, current Licenses or Credentials required to perform in Professional Classification (list school/ state and/or business/state):
4. Has your professional license ever been revoked or suspended?  Yes  No If yes, please provide details:
5. Is the Professional Classification under which you are applying for membership your primary occupation?  Yes  No

## IV. STANDARDS & EXPECTATIONS

1. Are you able and willing to make the commitment to arrive at the weekly meetings on time and stay through the 90 minutes, attend the Member Success Program and do you agree to abide by the **BNI Member Policies, Guidelines and Code of Ethics**?  Yes  No
2. Are you willing and able to send a substitute if you are unable to attend a meeting?  Yes  No
3. Are you willing and able to bring referrals and/or visitors to this chapter?  Yes  No
4. Have you ever been a member of a BNI chapter?  Yes  No o If yes, please provide details:
5. Do you belong to other networking organizations?  Yes  No If yes, please list:
6. Have you ever been convicted of an indictable offense?  Yes  No If yes, please provide details and year:

## V. TERMS & CERTIFICATIONS

By submitting this Application, you agree to receive communications from or relating to BNI, and further agree that BNI may share your information and any other information and material you provide with other BNI members, affiliates, vendors, and third parties in order to provide you services as a BNI member. You also agree that BNI may use video recordings and/or screenshots of chapter meetings or BNI related events, where you may appear, to post on BNI websites, social media platforms and/or to use in our worldwide trainings or marketing communications/materials. **See BNI Connect Privacy Policy for more information.**

**ARBITRATION.** All disputes arising out of or relating to this Agreement or the member's participation in BNI shall be resolved by binding arbitration in accordance with the laws of the Province where the applicant's BNI Chapter is located. The Arbitration shall be subject to the Rules of the Canadian Arbitration Association. The clause encompasses any and all disputes involving BNI, its franchisee, and their officers, directors, employees, agents and representatives, as well as members, provided that the disputes pertain to membership or participation in BNI.

**LIMITATIONS OF LIABILITY.** Notwithstanding any other provision of this Agreement, any liability to you involving BNI, its franchisee, and their officers, directors, employees, agents and representatives for any cause whatsoever arising out of or related to this Agreement and/or membership or participation in BNI, and regardless of the form of the action, will at all times be limited to the amount of the annual membership fee paid by you for membership in BNI. Except in Jurisdictions where such provisions are restricted, in no event will there be any liability to you or any third person for any indirect, consequential, exemplary, incidental, special or punitive damages. No actions hereunder may be commenced unless brought within one (1) year of accrual.

**TERM.** All term fees are measured from the application date. Applications dated between the 1st and the 15th of the month shall begin their term on the 1st of the month. Applications dated after the 15th of the month shall begin their term on the 1st of the following month. Terms run one (1) year from the date the term begins.

**CERTIFICATION.** I hereby declare and certify that all statements contained in this application and any accompanying documents are true and correct, and that any misrepresentation or false statement may be grounds for rejecting my application or, if discovered after my application has been accepted, subject me to immediate termination at franchisee's or BNI's discretion without any reimbursement. I further understand that my membership is conditional and I agree, accept and will abide by all the terms and conditions set forth herein and those contained within the **BNI Member Policies, Guidelines and Code of Ethics**, all of which I have had the opportunity to review upon request or received upon induction. I acknowledge that breach of these terms, conditions, and policies shall be grounds to terminate my membership. I understand and agree that **UPON ACCEPTANCE, FEES ARE NON-REFUNDABLE WITHOUT EXCEPTION.**

APPLICANT'S SIGNATURE

DATE

PRINT NAME CLEARLY

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**VI. BNI CODE OF ETHICS**

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

1. I will provide the quality of services at the price 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.
5. I will display a positive and supportive attitude.
6. I will live up to the ethical standards of my profession.

Professional standards outlined in a formal code of conduct for any profession supersede the above standards.

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**VII. APPLICATION PROCESS**

1. Prospective members must have a sponsor. Prospective members must complete this application and submit it to the Membership Committee for review.
  2. The Membership Committee will review your application, interview you, and inform you of your acceptance or non-acceptance.
  3. The Membership Committee notifies the President.
  4. The President announces new members at chapter meeting following acceptance by the Membership Committee and receipt of payment.
  5. Upon acceptance, you are required to attend the BNI Member Success Program.
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**VIII. MEMBER POLICIES**

1. Only one person from each BNI Classification can join a Chapter of BNI. Each Member can only hold one BNI classification in a BNI Chapter.
2. BNI Members must represent their primary professional focus.
3. BNI Members must arrive on time and stay for the entire published meeting time.
4. An individual can only be a Member of one BNI® Chapter. A Member cannot be in any other program that holds Members accountable for passing referrals.
5. A BNI Member is allowed three absences within a continuous six-month period. If a Member cannot attend, they may send a substitute; this will not count as an absence.
6. Members are expected to be engaged in the BNI Chapter by bringing qualified referrals and/or visitors.
7. Visitors may attend chapter meetings up to two times.
8. Only BNI Members who have completed the Member Success Program, and BNI Directors/Director Consultants can do Feature Presentations during the BNI Meetings.
9. Leaves of absence are possible for certain extenuating circumstances (e.g., extended medical issue that prevents member from working) at the discretion of the Membership Committee.
10. Members who wish to change their BNI classification must submit a new membership application for approval.
11. All BNI membership lists are for the purpose of giving referrals only. Before sending any marketing or business solicitation communications to BNI Members outside your chapter or Director/ Director Consultants, the recipient must give their consent. Consent must be freely given, specific, informed and unambiguous.

Policies are subject to change. All proposed policy changes need to be reviewed first by the International Board of Advisors.

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**IX. BUSINESS REFERENCES**

1. Name: \_\_\_\_\_ Position: \_\_\_\_\_  
Business: \_\_\_\_\_ Phone: \_\_\_\_\_  
Email: \_\_\_\_\_ Business Relationship: \_\_\_\_\_
  2. Name: \_\_\_\_\_ Position: \_\_\_\_\_  
Business: \_\_\_\_\_ Phone: \_\_\_\_\_  
Email: \_\_\_\_\_ Business Relationship: \_\_\_\_\_
  3. Name: \_\_\_\_\_ Position: \_\_\_\_\_  
Business: \_\_\_\_\_ Phone: \_\_\_\_\_  
Email: \_\_\_\_\_ Business Relationship: \_\_\_\_\_
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**X. MEMBERSHIP COMMITTEE USE ONLY**

Verified information and references?  Yes  No

Date Approved/Declined: \_\_\_\_\_ Vice President's Signature: \_\_\_\_\_

Date Applicant Notified: \_\_\_\_\_ VP Print Name: \_\_\_\_\_

Notification to President:  Accept  Decline