

# 2018 The Women's Business Network



Company \_\_\_\_\_

Name: \_\_\_\_\_

Date of Birth: Month and Day Only \_\_\_\_\_

Company: \_\_\_\_\_

Product/Service: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Website: \_\_\_\_\_

Facebook: \_\_\_\_\_ Twitter: \_\_\_\_\_

How Long have you been with this Company: \_\_\_\_\_

Who Referred you to The WBN?: \_\_\_\_\_

Anything Special About You that you would like us to know: \_\_\_\_\_

I have received a copy of the terms and conditions and understand my membership may be cancelled or revoked at any time if I do not adhere to these polices or engage in what Is deemed unethical or unprofessional behavior. I agree to all these terms and conditions. ***I understand there is a registration fee of \$25. I understand that if I fail to stay active in my membership (missing 3 or more consective meetings) my membership may be cancelled and I will be required to pay the registration to rejoin.***

I agree that The WBN may use any photographs of me with or without my name and for any lawful purpose, including but not limited to such purposes as publicity, illustration, advertising, and Web content.

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