

New Member **APPLICATION**



THE GwinnettBusinessNetwork
Give Business to Each Other

MISSION STATEMENT *Impacting business growth through high quality business relationships.*

This is an application for membership only. No guarantees of membership are stated or implied.

Name: _____ Birthday (mm/dd) _____

Legal Business Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Business Phone: _____ Cell: _____

Email Address: (work) _____ (personal) _____

Business Website: _____

Business Facebook: _____ Business Instagram : _____

Business Twitter: _____ Google Business: _____

Linkedin _____

Home Address: _____

Business Category to be represented (please list only one)? _____

The Gwinnett Business Network member who referred you to the group? _____

How long has Business been in the area/in operation? _____ Years How long have you been with them? _____ Years

Describe your industry knowledge/experience? _____

What is your Job Title or Role? _____ ☐ Part-Time ☐ Full-Time

Do you spend time directly with customers and other business contacts? ☐ Yes ☐ No

Do you belong to other networking organizations? ☐ Yes ☐ No

If yes, please list organizations _____

PROFESSIONAL REFERENCES AND CONTACT INFORMATION *(Must be Non-GBN members):*

Name: _____ Company: _____ Phone: _____

Name: _____ Company: _____ Phone: _____

Name: _____ Company: _____ Phone: _____

Name: _____ Company: _____ Phone: _____

Continues on reverse side

ABOUT THE GWINNETT BUSINESS NETWORK...

Founded in 2011, Gwinnett Business Network has served the Duluth and Suwanee, Georgia communities by bringing together dedicated small business professionals committed to helping one another succeed. Many of our founding members remain active participants today, reflecting the strength and longevity of our organization.

GBN provides a supportive environment where members can build meaningful business relationships, exchange referrals, and generate new opportunities. Membership is like having an extended sales team, with fellow members actively promoting and recommending your products and services within their professional and personal networks.

Through regular weekly meetings, members develop trusted relationships that foster collaboration, strengthen business connections, and create a structured system for sharing referrals and supporting each other's growth.

ABOUT MEMBERSHIP & MEMBER EXPECTATIONS...

The Gwinnett Business Network allows one representative per profession to avoid competition between members. Membership is not a shared seat between other company employees. *The person applying for membership must attend the majority of the meetings. The person must exhibit a strong moral standard and business ethic is required. New Member Training must be completed within 60 days of acceptance.* If these standards are not met, the member will be placed on probation; The Gwinnett Business Network reserves the right to terminate membership.

Are you willing and able to commit to arrive at weekly meetings on time and remain for the entire meeting (75 minutes), attend new member training, abide by GBN polices and code of ethics?

☐ Yes☐ No

Are you willing and able to have a monthly minimum number of two (2) Digging Deeper meetings?

☐ Yes☐ No

Are you willing and able to attend all weekly meetings, or have a substitute if unable to attend?

☐ Yes☐ No

Are you willing and able to bring one (1) qualified guest per month to meetings?

☐ Yes☐ No

Are you willing and able to meet the minimum yearly revenue given to GBN members of \$2,500?

☐ Yes☐ No

To be considered for membership, please submit this completed application to the Membership Committee at melissa@condortt.com along with the annual membership fee of \$399.00, payable by company check or Zelle (TreasurerGBN@gmail.com).

Applications will be reviewed by the Membership Committee, and applicants will be notified of the decision within three (3) weeks. Membership is subject to annual renewal and continued compliance with Gwinnett Business Network policies and networking standards.



By signing this application, you acknowledge that you have read, understand, and agree to abide by all membership terms and requirements. Membership fees are non-refundable upon acceptance.

If an application is not approved, any submitted check will be securely destroyed following notification. Membership fees paid via Zelle will be refunded through the same payment method. Returned checks due to non-sufficient funds (NSF) will be subject to the maximum processing fee permitted by law.

Applicant Signature_____

Date _____

For GBN use only. Do not write below this line.

☐ Check # _____

☐ Zelle

Date Application Submitted: _____Date Approved/Declined _____Date Inducted: _____