MSF Networking Membership Application (05/0	D9/2022)
Chapter Name:	APPLICATION FEE       \$150.00         PARTICIPATION FEES:       \$40.00         Option 1: \$480 Annual @ \$40 per month       \$40.00         Option 2: \$460 Annual paid up front       \$460.00         Option 3: \$850 2 years paid up front       \$460.00         TOTAL DUE TODAY: App fee + one option above (\$190 minimum)       \$         Option 1 (must pay both the application fee and setup monthly dues):
Mobile Phone: Profession: Sponsor:	Option 2: Option 3:
My license at any time has been revoked or suspended?       □ Yes       □ No       If yes         Have you ever been convicted of a felony?       □ Yes       □ No       If yes, reason:         Business reference:        Phone:	Email: Email:
	Signature:
1.       I am committed to arrive at our weekly meetings on time, stay throughout the 90 minutes, attend MSF Training, and work every day as part of the Sales Team for the other members of my chapter.      1         2.       I will abide by MSF Member Policies, Guidelines, and Code of Ethics.      2         3.       I will send a substitute if I am unable to attend a meeting and will invite visitors to our chapter on a weekly basis.      3         4.       I do not have any allegiances that will prevent me from referring clients to my chapter.      4         5.       I do not belong to any other organization that only allows 1 person per profession.      5         6.       I will prevent goodwill and keep a positive attitude with the members of my chapter.      7         8.       I will call or text the President or Vice President if something comes up last minute and I have to miss a meeting.      8	
By submitting this Application, you agree to receive communications from or relating to MSF, and further agree that MSF may share you information and any other information and material you provide with other MSF members, affiliates, vendors, and third parties in order to provide you services as a MSF member. ARBITRATION: All disputes arising out of or related to this Agreement or the member's participation in MSF shall be resolved by binding arbitration in accordance with the laws of the State of Okahoma. The Arbitration Assumption to the Review of the American Arbitration Association. This includes any & all disputes involving MSF, directors, employees, agents and representatives, as well as members, provided that the disputes pertain to membership or participation in MSF. And representatives for any cause whatsoever arising out of or related to this Agreement and/or membership to participation in MSF. Fix, and representatives whatsoever arising out of or related to this Agreement and/or membership or participation in MSF. Fix, and representatives of on any cause whatsoever arising out of or any indirect, consequential, exemplary, incidental, special or punitive damages. No actions hereunder may be commenced unless brought within one (1) year of acrual. TERM. All term fees are measured from the application date. Applications dated between the 1 <sup>st</sup> and the 15 <sup>th</sup> of the month shall begin their term on the 1 <sup>st</sup> of the following month. Terms run for one (1) year form the date the term begins. CERTFIFICATION: I hereby declare and certify that all statements contained in this application on any accompanying documents are true and within the MSF. Member Policies, Guidelines, and Code of Ethics, all of which I have had the opportunity to review on www.msfweb.com or have received. I acknowledge that breach of these terms, conditions, and policies shall be grounds to terminate my membership. I understand and agree that upon my acceptance to MSF. Beeneethership is the application or, if discovered after my application	
Applicant's Signature     Date	Print Name Clearly