



# “*Tam-Net*” Membership Application



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

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

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Cell: \_\_\_\_\_ Other: \_\_\_\_\_

Email Address: \_\_\_\_\_ website: \_\_\_\_\_

Exact Description of Product or Services: \_\_\_\_\_

\_\_\_\_\_

What do you expect to **bring** to our *Tam-Net* Group: \_\_\_\_\_

\_\_\_\_\_

What do you expect **from** our *Tam-Net* Group: \_\_\_\_\_

\_\_\_\_\_

What other businesses would you like to see as part of the Tam-Net Group: \_\_\_\_\_

\_\_\_\_\_

### **Requirements of Membership to *Tam-Net*:**

**Member must be a paid member of the Tamarac Chamber of Commerce.**

**Member must attend the once monthly *Tam-Net* meeting.**

**Member must attend at least one other Chamber meeting or event per month.**

*Tam-Net* is a referral group limited to one of each profession. It is intended to be an additional resource for Tamarac Chamber of Commerce members. *Tam-Net's* goal is to organize a professional referral group, get to know each member and their product or service and support each other with referrals.

I agree to meet the requirements of membership to the *Tam-Net* referral group as posted above.

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

Application subject to *Tam-Net* Committee approval.