

The Marketplace CPR Network Membership Application

Name (and Nickname) : _____

Address: _____

City: _____ State: _____ Zip: _____

Work phone: _____ Mobile phone: _____

Fax: _____ Emailaddress: _____

Website: _____

Type of business: _____

Short business description: _____

Discounts you want to offer members: _____

Home phone: _____

Home church (required field) : _____

Home chapter (circle one): *(Not applicable at this time)*

To Apply for Membership

1. Complete this application.
2. Sign the covenant on the back.
3. Submit application with payment (cash, check payable to **Marketplace CPR**, or credit card) to Marketplace CPR Director at a meeting

OR: mail the above to:

Ken Becker
320 Ryder Cup Circle #206
St. Augustine, FL 32092

Payment Amount _____

(\$120 - full year, or prorated amount if applicable)

Credit Card Type (circle one):

Visa MasterCard American Express Discover

Credit Card Number: _____

Expiration Date: ____/____ Security Code: _____

Name as it appears on card:

Billing Address: _____

_____ Zip _____

Upon Acceptance, You Should Expect

1. The Marketplace CPR leadership team and membership committee will be notified.
 2. You'll be eligible for all the membership benefits (see chapter director).
- Membership for an individual member is \$120 (monthly pro-rate available for 1st year membership).*

The Marketplace CPR Network

Our mission is to provide a forum where Marketplace Christians can connect and support one another on a consistent basis.

Our three-fold purpose is to:

- Accelerate our members' business growth
 - Foster God-honoring relationships
- Have fun while learning and growing together

Our Vision For The Marketplace CPR Network:

- To be the Premier Resource where Marketplace Christians can Connect to Build Business Relationships

Membership Covenant

- I believe Jesus Christ is the Son of God and I have personally accepted his gift of salvation.
- I believe the Bible is the inspired Word of God and its teachings are to be applied to both our personal and business lives.
- I agree to operate in my workplace according to biblical principles to the best of my abilities.

Signature: _____ Date: _____

Printed name: _____