

Trusted Business Partners Membership Application



Trusted Business Partners

Chapter _____

Sponsor _____

Trust • Integrity • Partnership • Excellence

Applicant's Name: *(first)* _____ *(last)* _____

TBP Anniversary Date: ___/___/___ Member Birthday: ___/___/___

Business Name: _____ # Years with Company _____

Business Address: *(street)* _____ *(city)* _____ *(zip)* _____

Home Address: *(street)* _____ *(city)* _____ *(zip)* _____

Phone #'s: Business: (____) _____ - _____ Home: (____) _____ - _____ Cell: (____) _____ - _____

E-Mail Address: _____ Website Address: _____

Primary Profession or Business: _____

Secondary Profession or Business: _____

Business References

1) Name: *(first)* _____ *(last)* _____

Contact Info: Phone (____) _____ - _____ Email _____

Business Name: _____ Position _____

Business Relationship _____

2) Name: *(first)* _____ *(last)* _____

Contact Info: Phone (____) _____ - _____ Email _____

Business Name: _____ Position _____

Business Relationship _____

(Initial) _____



Page 2 Applicant's Name: (first) _____ (last) _____

Business Details

Description of Services or Products _____

Experience in Profession/Field/Industry/Occupation _____

Educational Background in Profession/Field/Industry/Occupation List degrees/licenses/certification/credentials

Membership Affiliations in Networking or Civic Groups, Chambers of Commerce, etc.,

1) _____ 3) _____

2) _____ 4) _____

Social Media Accounts, Do you have: Facebook(Biz.Pg.) ____, Twitter ____, LinkedIn ____

I agree to the following Terms and Declaration.

(sign) _____ (date) ____/____/____

- ✓ Arbitration – All disputes arising out of or related to this Agreement or the member's participation in the Trusted Business Partners shall be resolved by binding arbitration in accordance with the laws of the State of California. The Arbitration shall be subject to the Rules of the American Arbitration Association. This clause encompasses any and all disputes involving Trusted Business Partners, and their officers, directors, agents, and representatives.
- ✓ Limitations on Liabilities – Notwithstanding any other provision of this Agreement, any liability to you involving the Trusted Business Partners, and their officers, directors, agents, and representatives for any cause whatsoever arising out of or related to this Agreement and/or membership or participation in the Trusted Business Partners, and regardless of the form of the action, will at all times be limited to the amount of yearly dues paid by you for the membership in the Trusted Business Partners. Except in jurisdictions where such provisions are restricted, in no event will there be any liability to you or any third person for any indirect, consequential, exemplary, incidental, special punitive damages.
- ✓ I hereby declare and certify that all Statements contained in this application and any accompanying documents are true and correct, and that any misrepresentation or false statement may be grounds for rejecting my application or if discovered after my application has been accepted, subjected me to immediate termination at the Trusted Business Partners discretion without any reimbursement. I further understand that my membership is conditional and I agree, accept and will abide by all the terms and conditions set forth herein and those contained with the Trusted Business Partners Policies, Guidelines and Code of Ethics.

(Initial) _____



Page 3 Applicant's Name: (first) _____ (last) _____

Trusted Business Partners' Ethics, Policies & Fees

These are important guidelines that the Trusted Business Partners believe in. We believe all men and women are to be treated equal and we do not discriminate against anyone. We believe in being the best networking group. Upon acceptance to Trusted Business Partners, I agree to abide by the following **Code of Ethics** during my participation as a partner of this group. (sign) _____

- Show up to **every** charter/chapter meeting with a positive and supportive attitude.
- To endeavor to provide a suitable substitute if unable to attend a meeting.
- To participate in non-meeting Trusted Business Partner functions
- Never lie to, manipulate, or in any way deceive another member of TPB.
- Provide a high level of service to all referrals by responding as quickly as possible. Understand that when contacting and working with that referral that I am representing both the person that gave it to me, as well as myself.
- Live up to the ethical standards of my profession as well as that of Trusted Business Partners.
- Promise to only provide qualified referrals, not cold leads.
- I understand that as a member of Trusted Partners that I will address the leadership committee if I feel there is any problem between myself or any partner in the group.
- I promise that I will not join another networking group that only has one member per profession per group while I am a member of Trusted Business Partners.
- If called upon, to accept a leadership responsibility in the charter, committee, or board level.

I agree to the following **General Policies**. (sign) _____

TBP Networking Inc. (a for profit corporation) is responsible for the Chartering of all new Chapters, and maintaining all policies, rules and regulations and the integrity of all Meetings, Advertising, Logos, Trademarks of "Trusted Business Partners". Upon acceptance to Trusted Business Partners, I promise to maintain my TBP Membership status in good standing by observing the following General Policies:

- ✓ The use of using / representing TBP and any of its subsidiaries in any business transaction without the expressed consent of TBP is strictly forbidden.
- ✓ Any use of TBP logos, materials, expressed or implied, for the purpose of advertising/promoting in personal/company or Trusted Business Partners meeting, events etc. must comply with TBP Inc. Guideline.
- ✓ TBP Networking Inc. reserves the right to revoke a member for cause at its discretion.
- ✓ One protected and primary profession or specialty per member.
- ✓ Membership registration fee and monthly dues must be kept current.
- ✓ **Attendance is mandatory. Please send a substitute in your absence. 4 absences per quarter may result in the re-opening of your profession within the group.**
- ✓ **There is no leave of absence except medical leaves** upon prior approval from the Leadership Team.
- ✓ Should you decide to terminate your membership with Trusted Business Partners (other than for documented medical reasons), then no refund is due.

✓ (Initial) _____



Page 4 Applicant's Name: (first) _____ (last) _____

Trusted Business Partners' Ethics, Policies & Fees, cont'd.

- ✓ Members who wish to change their designated profession or specialty classification must submit a new application to the membership coordinator for review.
- ✓ Applicants must receive a vote of approval from the Leadership Team to become an official member.
- ✓ Visitors may attend a chapter meeting twice before submitting an application for membership. The Leadership Team will then have an additional two weeks to make their decision and notify the applicant.
- ✓ The Leadership Team has the final authority to resolve any conflict between classification issues.
- ✓ An election will be held during the 4th quarter of each year for all leadership positions for each chapter.
- ✓ All leadership team members will hold their position for one (1) calendar year; all incumbent leadership team members may volunteer for re-election; there is no term limits for a specific leadership role.

Policies Regarding Members in Network Marketing (MLM) Businesses

- ✓ May only represent the products of the business, not the business opportunity regarding meetings, one-on-ones, events and communications with TBP members.
- ✓ Failure to abide with these rules may result in immediate suspension and/or revocation of membership from the group.

Policies Regarding Membership Transfers:

- Only to start a new Chapter.
- Must take a Leadership position.
- No more than 2 members from an existing group can start/join a new group.
- A re-registration fee may be required based on the type of membership originally purchased.

Policies Regarding Procedural Changes and Use of TBP Documents:

- Any requested procedural or document changes are to be presented in writing to your chapter President and/or the TBP ambassador.
- All documents/forms shall be standardized, assigned a number and on file in the TBP Library.
- Website/document content shall only be changed by the Board of Directors.

As it is important that all policies, guidelines, and codes of ethics be maintained by ALL MEMBERS of TBP, any violation of any of the above shall result in the immediate Suspension and all rights and privileges of membership, and/or Termination of Membership.

✓ (Initial) _____



TBP Member Registration & Dues Payment Authorization

✓ Please complete all fields. This authorization will remain in effect until cancelled. All cancellations must be made in writing 15 days prior to scheduled payment processing date. All of the unpaid balance for Annual Membership Dues will be due at the time of cancellation. (Initial) _____

Member's Account Information for ACH Authorization (Preferred): Checking or Savings

Name on Account: _____ Bank Name: _____

Routing Number: _____ Account Number: _____

OR Alternate Payment Methods: Credit/Debit Card: Pay By Check \$195 Reg. and/or \$150 Dues Only:

Card Type: MasterCard VISA Discover AMEX | Check # _____ Amount \$ _____

Cardholder's Name (as on card): _____ Business Name: _____

Card Number: _____ Security Code: _____

Expiration Date (mm/yy): ____/____/____ Cardholder ZIP Code (from credit card billing address): _____

PAYMENT METHOD AGREEMENT:

I, _____, authorize Trusted Business Partners (TBP) to process payment for the agreed payment(s). The membership authorization will be processed until canceled in writing by member. It is also understood that my information will be saved and with this authorization can be used for future event payments and purchases, and for the unpaid balance for Annual Membership Dues upon cancellation.

Sign _____ Date ____/____/____

Registration Options:

One Time New Member Registration Fee: \$ 195.00 ____ to be processed on ____/____/____ (1st or 15th of month)

OR \$55.00 x 4 consecutive months to be processed on ____/____/____ (1st or 15th of month)

OR (if changing Chapters or Profession) **Re-registration Fee** \$ 100.00 ____ to be processed on ____/____/____

Membership Dues Payment Options/Agreement:

Membership is based on an Annual Agreement; fees apply on timed payments (excluding Annual or Gold).

Annual Membership Dues \$150.00 to be processed on ____/____/____ (1st or 15th of month) for 1st year, invoiced annually thereafter. **OR,** **Timed Payment Options** to be processed starting on ____/____/____ :

1.. **Quarterly:** \$50.00; 2. **Semi-Annual:** \$85.00; 3. **Annual:** \$150.00; 4. **GOLD Membership** \$99.95/mo.;



TRUSTED BUSINESS PARTNERS NON-DISCLOSURE AGREEMENT

This Nondisclosure Agreement (the "Agreement") is entered into by and between **Trusted Business Partners**, ("Disclosing Party") and **TBP Members**, ("Receiving Party") for the purpose of preventing the unauthorized disclosure of Confidential Information as defined below. The parties agree to enter a confidential relationship with respect to the disclosure of certain proprietary and confidential information ("Confidential Information").

1. Definition of Confidential Information. For purposes of this Agreement, "Confidential Information" shall include all information or material that has or could have commercial value or other utility in the business in which Disclosing Party is engaged. If Confidential Information is in written form, the Disclosing Party shall label or stamp the materials with the word "Confidential" or some similar warning. If Confidential Information is transmitted orally, the Disclosing Party shall promptly provide a writing indicating that such oral communication constituted Confidential Information.
2. Exclusions from Confidential Information. Receiving Party's obligations under this Agreement do not extend to information that is: (a) publicly known at the time of disclosure or subsequently becomes publicly known through no fault of the Receiving Party; (b) discovered or created by the Receiving Party before disclosure by Disclosing Party; (c) learned by the Receiving Party through legitimate means other than from the Disclosing Party or Disclosing Party's representatives; or (d) is disclosed by Receiving Party with Disclosing Party's prior written approval.
3. Obligations of Receiving Party. Receiving Party shall hold and maintain the Confidential Information in strictest confidence for the sole and exclusive benefit of the Disclosing Party. Receiving Party shall carefully restrict access to Confidential Information to employees, contractors and third parties as is reasonably required and shall require those persons to sign nondisclosure restrictions at least as protective as those in this Agreement. Receiving Party shall not, without prior written approval of Disclosing Party, use for Receiving Party's own benefit, publish, copy, or otherwise disclose to others, or permit the use by others for their benefit or to the detriment of Disclosing Party, any Confidential Information. Receiving Party shall return to Disclosing Party any and all records, notes, and other written, printed, or tangible materials in its possession pertaining to Confidential Information immediately if Disclosing Party requests it, in writing.
4. Time Periods. The nondisclosure provisions of this Agreement shall survive the termination of this Agreement and Receiving Party's duty to hold Confidential Information in confidence shall remain in effect until the Confidential Information no longer qualifies as a trade secret or until Disclosing Party sends Receiving Party written notice releasing Receiving Party from this Agreement, whichever occurs first.
5. Relationships. Nothing contained in this Agreement shall be deemed to constitute either party a partner, joint Venture or employee of the other party for any purpose.
6. Severability. If a court finds any provision of this Agreement invalid or unenforceable, the remainder of this Agreement shall be interpreted so as best to affect the intent of the parties.
7. Integration. This Agreement expresses the complete understanding of the parties with respect to the subject matter and supersedes all prior proposals, agreements, representations, and understandings. This Agreement may not be amended except in a writing signed by both parties.
8. Waiver. The failure to exercise any right provided in this Agreement shall not be a waiver of prior or subsequent rights.

✓ (Initial) _____



Page 7 Applicant's Name: (first) _____ (last) _____

TRUSTED BUSINESS PARTNERS NON-DISCLOSURE AGREEMENT, cont'd

This Non-Disclosure Agreement and each party's obligations shall be binding on the representatives, assigns and successors of such party. Each party has signed this Agreement through its authorized representative.

Signed this ____ day of _____ 20__.

Member – Print Name

Sign Name

TBP Official – Print Name/Title

Sign Name

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TRUSTED BUSINESS PARTNERS NON-COMPETE AGREEMENT

For good consideration and as an inducement for Trusted Business Partners to approve

(member's name) _____ for membership, the undersigned Member hereby agrees not to directly or indirectly compete with the business of Trusted Business Partners and its successors and assigns during the period of membership and for a period of three (3) years following termination of membership and notwithstanding the cause or reason for termination of membership.

The term "not compete" as used herein shall mean that the Member shall not own, manage, operate, or consult in a business substantially similar to or competitive with the present business of Trusted Business Partners or such other business activity in which Trusted Business Partners may substantially engage during the term of membership.

The Member acknowledges that Trusted Business Partners shall or may in reliance of this agreement provide Membership access to trade secrets, customers and other confidential data and good will. Member agrees to retain said information as confidential and not to use said information on his or her own behalf or disclose same to any third party.

This Non-Compete Agreement shall be binding upon and inure to the benefit of the parties, their successors, assigns, and personal representatives.

Signed this ____ day of _____ 20__.

Member Business Name

Member – Print Name

Sign Name

TBP Official – Print Name/Title

Sign Name



Trusted Business Partners Harassment Protocol

Trusted Business Partners has implemented a policy on harassment, independent of the form, intention, meaning or method of expression. Maintaining congruency in the denotation of the name and brand, Trusted Business Partners, is paramount. As such, the following protocols are in place in response to any levied notification(s) of harassment.

- 1) Immediately upon notification of perceived harassment, 2 current Board Members are to be notified by email. If Chapter President is notified initially, they are to report the incident via email with as much specificity as is known. Chapter President is to cc a minimum of 1 additional Board Member in correspondence.
- 2) Conference call is to be scheduled with each individual party to express their side of the story. Each party is to be informed that the calls may be recorded for monitoring purposes.
- 3) The Board Members will meet to review the details of both calls and determine, if warranted, a viable course of action: written reprimand/warning, dismissal, or cooling off period (non-attendance of TBP meetings or socials for a specified length of time).
- 4) All parties involved will receive final findings and decision in writing.

Member
Name _____ Signature _____ Date ___ / ___ / ___