

The following information is required of each new Member & Associate

Firm Name	
Address	
Telephone	Fax
Bank Reference	
Classification	
Which is	% of entire business # of Employees
Additional Lines	
(for credit card)	
Email Address: _	will receive billing receipts via email at this address.)
	t be an Owner, partner or Executive Official)
Spouse's Name	
	m
Home Address _	
Home Phone	Birth day/month
Email Address: _	

Associate Representative

Full Name		
	(Must be an Owner, partner or E	executive Official)
Spouse's N	Name	
Position wi	ith Firm	
Home Add	lress	
Home Pho	ne	Birth day/month
Email Add	ress:	

The Dallas Executives Association requires of its designated members the following duties:

- 1. Provide leads or tips on new business each week which might benefit one or more members.
- 2. Attending in person all scheduled meetings unless urgent health or business reasons prevent attendance.
- 3. Visit the member's place of business as specified by the scheduled Book signings.
- 4. Familiarizing themselves with the various businesses represented in the Association for the purpose of making as many recommendations of business to fellow members as circumstances permit.
- 5. Mentioning at all suitable times the merits of the various members of the Association and recommending them to friends and business associates.
- 6. Acting promptly on all business information received, following it up diligently, and making every reasonable attempt to turn it into consummated business.
- 7. Handling all referred business in such a thorough manner that it will reflect credit on the recommending member.
- 8. Paying dues at rates provided by the Board of Directors.
- 9. Striving at all times for quality merchandise and service and resisting pricecutting and cheapening of products or service.
- 10. Pledging to keep the source of all information furnished by the Association strictly confidential.

CREDIT CARD AUTHORIZATION:
, hereby authorize the Dallas executives Association to charge to the following credit/debit card account for all ues and other fees. This payment agreement will be in effect until ended by equest of the Representative in writing. I hereby agree to these charges to my
redit/debit card and waive my right to any chargeback. Monthly dues will be harged on the 1st of every month.
Card Type: Visa MasterCard American Express
Card Number:
xp Date: Authorization Code:
lame on Card:
Cardholder's Signature:
Date

To the Board of Directors DALLAS EXECUTIVES ASSOCIATION Dallas, Texas

We hereby make an application for membership in your Association and promise that, if accepted, we shall fully comply with all the requirements of your Association as listed on the opposite page. An executive officer or member of our firm shall regularly attend your meetings unless prevented by health or urgent business reasons.

We have provided credit card authorization for our \$250.00 membership fee and monthly dues, which you will return only in case your Association declines this application. It is agreed that the application will be returned to us in case your Association finds that our main classification conflicts with that of a member. You also agree that, if our application is accepted, you will not accept an application from another person whose main classification is in competition with our main classification, but we understand that this promise does not apply to our sidelines.

We hereby agree to subscribe to the Constitution and By-Laws, Rules and Regulations of the Association as they now exist and/or as they may be amended.

Firm iva	ime	
Ву		
•		
recomme	nd the acceptance of this member:	
Name o	f Proposer	
	-1	
Chairm	an Marcharabin Committee	
Chairma	an, Membership Committee	
		