



# Membership Application

Dues/One-year membership. BD Guild membership is individually based and is nontransferable or refundable. Return completed form with payment to: The Business Development Guild, LLC, 10645 N Tatum Blvd, #C200-241, Phoenix, AZ 85028. Questions? Email [leaders@businessdevelopmentguild.com](mailto:leaders@businessdevelopmentguild.com).

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Designation(s): \_\_\_\_\_ Position/Title: \_\_\_\_\_

Company/Organization: (If full-time student, list college or university name and number of class hours taken.)  
\_\_\_\_\_

Email: \_\_\_\_\_ Mobile/Home Phone: \_\_\_\_\_

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

State/Province: \_\_\_\_\_ Birth Month: \_\_\_\_\_

Zip/Mail Code: \_\_\_\_\_ Country: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Business Fax: \_\_\_\_\_

## Base Membership:

For 2019 we are continuing to offer our exclusive "One-Plus-One Model". Whomever your company designates PLUS one other participating individual at events at the members only rate. This enables operations personnel to participate and benefit. Only \$299 Annual Fee. We are also offering a Young Professional rate of \$169 for those under 35.

## Payment Information:

American Express  Discover  MasterCard  Visa

Card Number: \_\_\_\_\_

Exp. Date (M/Y): \_\_\_\_\_ Authentication Number (3-4 digit # on front or back of card): \_\_\_\_\_

Card Authorized Name: \_\_\_\_\_

Card Billing Street Address: \_\_\_\_\_

Card Billing City, State: \_\_\_\_\_ Card Billing Zip/Mail Code: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

Enclosed is check # \_\_\_\_\_ in the amount of US\$: \_\_\_\_\_

I would prefer someone contact me in December to process payment  I would prefer to be invoiced

Thank you for being a founding member of the BD Guild.  
[www.businessdevelopmentguild.com](http://www.businessdevelopmentguild.com)