



SESORE Application for Membership

Name _____ Company Name _____

Phone _____ Cell Phone _____ Email _____

Membership Costs - \$150.00 per year / \$100.00 per year for APRO members

Who invited you to SESORE _____

Experience/Education in your field (License, Degree, Certificates) _____

Full or Part Time _____ How long in Business _____

Commitment

- Committed to meetings? (meet twice a month on Friday's at 8:00 am sharp for 1 hour) _____
- What is your ability to bring guests _____
- Do you belong to other Network Organizations _____
- If so, which ones _____

Process

- 1 meeting as a guest
- Complete this application and email or fax to Kim Panozzo @ 602-749-6333 or kim@thepanozzoteam.com
- Member Approval

Approval Process

- Majority Approval

Yes _____ No _____