

# **Big Island Referral Network – Application**

Date: \_\_\_\_\_ Name (first) \_\_\_\_\_ Name (last) \_\_\_\_\_

Spouse Name: \_\_\_\_\_ Spouse Occupation: \_\_\_\_\_

Business Name: \_\_\_\_\_ Years in Business: \_\_\_\_\_

Business Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Describe your Product or Service: \_\_\_\_\_

\_\_\_\_\_

Website Address: \_\_\_\_\_ Email: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Bus. Fax: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

**Yearly Dues: \$600.00**

**Can you make a commitment to 1st and 3rd Thursday's at 8am in Hilo? \_\_\_\_\_ YES \_\_\_\_\_ NO**

Business References:

1. Name: \_\_\_\_\_ Position: \_\_\_\_\_  
Business: \_\_\_\_\_ Phone: \_\_\_\_\_

2. Name: \_\_\_\_\_ Position: \_\_\_\_\_  
Business: \_\_\_\_\_ Phone: \_\_\_\_\_

What separates you from your competition? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

***By joining the BIG ISLAND EXCLUSIVE REFERRAL NETWORK, you lock out your competition and join a team of business owners committed to building and strengthening local businesses thru referrals.***