



## ***BNI's Networking Code of Ethics***

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Upon acceptance to BNI, I agree to abide by the following Code of Ethics during the tenure of my participation in the organization:

1. *I will provide the quality of services at the prices I have quoted.*
2. *I will be truthful with the members and their referrals.*
3. *I will build goodwill and trust among the members and their referrals.*
4. *I will take responsibility for following up on the referrals I receive*
5. *I will display a positive & supportive attitude with BNI members.*
6. *I will live up to the ethical standards of my profession.*

*Professional standards outlined in a formal code of ethics supercede the above standards.*

**Terms:**

**Arbitration.** All disputes arising out of or related to this Agreement or the member's participation in BNI shall be resolved by binding arbitration in accordance with the laws of the State where the applicant's BNI Chapter is located. The Arbitration shall be subject to the Rules of the American Arbitration Association. This clause encompasses any and all disputes involving BNI, its franchisee, and their officers, directors, agents and representatives.

**Limitations on Liability.** Notwithstanding any other provision of this Agreement, any liability to you involving BNI, its franchisee, 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 BNI, 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 BNI. 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 or punitive damages.

### **BUSINESS REFERENCES**

**List Two Business References:**

Name: \_\_\_\_\_

Position: \_\_\_\_\_

Company: \_\_\_\_\_

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

Business Relationship (describe): \_\_\_\_\_

Name: \_\_\_\_\_

Position: \_\_\_\_\_

Company: \_\_\_\_\_

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

Business Relationship (describe): \_\_\_\_\_

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, subject to immediate termination at BNI's 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 within the BNI Policies, Guidelines and Code of Ethics.

**UPON YOUR ACCEPTANCE TO BNI, FEES ARE  
NON-REFUNDABLE WITHOUT EXCEPTION.**

**Applicant's Signature:** \_\_\_\_\_

*Note: You may attach a résumé or biography for additional information. Thank you.*

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### **MEMBERSHIP COMMITTEE USE ONLY**

Application information verified:     YES     NO

Verified by: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant Interview Date: \_\_\_\_\_

Interviewed by: \_\_\_\_\_

Comments: \_\_\_\_\_

**RECOMMENDATION TO PRESIDENT:**     ACCEPT     DECLINE

**AUTHORIZING SIGNATURE**  
**(Membership Committee):**

Date: \_\_\_\_\_

Comments: \_\_\_\_\_

If applicant was declined, was there a conflict with a current member? Please explain: \_\_\_\_\_