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MEMBERSHIP APPLICATION		
Com	npany Name:	Phone:
Addı	ress:	Fax:
		Zip:
Ema		# of Employees:
Com	npany is:	☐ Sole Proprietor
Brie	f History of company – including the number of years	conducting business in the Orlando Area:
Cate	egory of Business:	
Does	s the above stated category represent 75% of total busi	ness activity?
Who	o will be responsible for EEC Dues and Fees? Comp	pany Desginated Representative by Personal Check s by personal check, please complete reverse side of application)
		Y IS THE MEMBER AND THE COMPANY FOLLOWING POLICIES:
1. 2. 3.	Attendance is required at a minimum of 64% of Wednesday morning meetings and 64% of open houses. The company must give a presentation and open house at least once every two years. The company, or a representative of the company, may not hold membership in another leads group in Orange or Seminole Counties, unless the member of the other leads group is a different representative than the EEC representative and from a different office than the EEC representative. A minimum of one complete lead is required each week.	
5.	Dues are \$50.00 per month and payable one mont	h in advance.
6. 7.	Manager/Owner must attend a minimum of one (Designated Representatives and Alternates must a	
Prin	ited Name of MANGER/OWNER or OFFICER:	
Sign	nature of MANAGER/OWNER or OFFICER:	Date:
Sponsor:		Roll #:

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