



Boot Camp Completion And Vetting Form

There are five (5) requirements that need to be completed within the first four (4) months which will allow you to start receiving sub hub requests. Completion will then give you access to grow your business by subbing in other NGBC chapters. ALL members are required by the Code of Conduct to complete this to comply with your membership agreement.

Member Name: _____ Chapter: _____

Date Joined: _____ Completion Date: _____ Initial Dues Paid (*\$150.00): _____

(*\$95.00 admin +\$55.00 1st months dues)

Step 1: Register on the NGBC Website and "Like" the NGBC Facebook Page

- To like Facebook: <https://www.facebook.com/north georgia business connection> (in search bar)

Step 2: Attend New Member Orientation and Training

- Members have two (2) consecutive opportunities to attend New Member Orientation and Training or risk forfeiting membership.
- Training is held every 3rd Tuesday of the month. Completion signed off by Trainer: _____

Step 3: Bring Two (2) Guests to Any Chapter

- Your Chapter Consultant will verify the guests that you invited and who attended in another Chapter

Guest: _____ Location: _____ Date: _____

Guest: _____ Location: _____ Date: _____

Completion signed off by Chapter Consultant: _____

Step 4: Complete Three (3) One-on-One Sessions with Three (3) NGBC Members

- Your first One-on-One MUST be with your Chapter Consultant; the other two (2) sessions are assigned by your Chapter's Assistant Director or Chapter support.

Consultant: _____ Date: _____

Member: _____ Date: _____

Member: _____ Date: _____

Completion signed off by Chapter Consultant: _____

Step 5: Pass a Minimum of Four (4) Qualified Referrals to Members within the NGBC

Your Chapter Consultant will keep track of the number of referrals you pass within your Chapter. It is up to you to report any referrals you pass in any other affiliated Chapters to your Chapter Consultant. Please remember that if you bring a guest to ANY chapter, that will count toward your referral count.

Referrals

1/Date: _____ Referral

2/Date: _____ Referral

3/Date: _____ Referral

4/Date: _____ Referral

Completion signed off by Chapter Consultant: _____ **Vetting Process:**

Your Chapter Consultant will submit this form to the Administrative Director who will then add you to the SubHub Distribution List and mark you as a Veteran!

CONGRATULATIONS!

