



Visitor Sign-In Sheet

Welcome to today's BNI Meeting. In order for us to know you better, we ask that you provide the following information. Thank you for your interest in BNI. Please give to Sec/Tres and VP after meeting.

Date: _____ Chapter Name: _____

Name:	Business:	
Address:	City:	Zip:
Invited by:	E-Mail:	
Comments:		
Phone:	Fax:	
First Time Visitor <input type="checkbox"/>	BNI Member or Staff <input type="checkbox"/>	Other <input type="checkbox"/>

Name:	Business:	
Address:	City:	Zip:
Invited by:	E-Mail:	
Comments:		
Phone:	Fax:	
First Time Visitor <input type="checkbox"/>	BNI Member or Staff <input type="checkbox"/>	Other <input type="checkbox"/>

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Address:	City:	Zip:
Invited by:	E-Mail:	
Comments:		
Phone:	Fax:	
First Time Visitor <input type="checkbox"/>	BNI Member or Staff <input type="checkbox"/>	Other <input type="checkbox"/>

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