

Club Visit Request Form

Date:		
Club Name:		
Number of Members:	_ BetterInvesting Club Num	ber:
How many members belong to B	etterInvesting?	
Month and Year Organized:	Use Club Accoι	unting? Yes No
Club Contact:		
Phone:	Email:	
Mailing Address:	City:	Zip Code:
Topics of Interest:		
BetterInvesting for your local chapte	er; bookkeeping and accounti ies etc. Every new or existing ar.	dance for new clubs; resources from ing for adding a new member; partial or BetterInvesting club is entitled to one
Location:		
,	•	ock Selection Guide (SSG), Stock SSG Core or SSG Plus online, refer
For a personalized club visit with purpose to teach a class or concept, a per attendee fee is required. Classes are not less than two hours, for a fee of \$5.00 per hour per person, and a minimum total of \$50.00. For example, a club consisting of ten people would pay \$100 for a two-hour class. The money is payable to the Channel Islands Chapter.		
Yes, our club would like a class	on	
We understand the above guid	elines. Presiding Member s	signature

Applications for club visits are required at least 30 days in advance. Send to: Registrar, Channel Islands Chapter, BetterInvesting, P.O. Box 3418, Camarillo, CA 93011-3418. Questions? Call (805)-987-2000.