

CEO Clubs Network Application



CEO Clubs Network®

Joining Category

- VIP Membership** **AED 125,000**
Yearly with Utmost Benefits **US \$ 35,000**
- Elite Membership** **AED 55,000**
Exclusive Benefits 5 Years **US \$ 15,000**
- Elite Membership** **AED 30,000**
Executive Benefits 2 Years **US \$ 8,200**
- Elite Membership** **AED 18,900**
Executive Benefits 1 Year **US \$ 5,145**

Payment Options

- Cheque**
Payable to "CEO Clubs Network"
- Bank Transfer**
Submit application to issue invoice
- PayPal**
- Credit Card Authorization**
- App (CEO Clubs) Payment**
- Online Payment**

**This membership application must be accompanied with payment before activation*

**CEO Clubs Members are committed to engage & add values to the CEO Clubs community*

CEO Clubs Network

P.O. Box: 58162, Dubai, UAE

Phone: +971 4 346 1112, +971 4 346 5101

Website: www.ceoclubsnetwork.com, www.ceoclubsuae.com

Email: info@ceoclubsnetwork.com

Member Information

Title: Dr Mr Mrs Ms Miss

Full Name: _____ Single Married

Age Group 25-30 30-35 35-45 45-55 55-65 65+

Date of Birth: Day _____ Month _____

Education level: Bachelor Master Doctorate

Company Name: _____

Designation: _____ Nationality: _____

Business Address: _____

P.O. Box: _____ City: _____ Country: _____

Tel: _____ Mobile: _____

Email: _____ Website: _____

Your social media: _____    

Preference:

Breakfast Meeting

Lunch Meeting

Dinner Event

High Tea

Cigar Night

Conference & Seminar

Delegation

Wellness Session

Virtual Meeting

Hobby:

Reading

Tennis

Golf

Cricket

Concert

Travel

Yoga

Football

Basketball

Collection Item:

Watch

Pen

Jewelry

Car

Antique

Stamp

Coin

Painting

Book

Others: _____ Others: _____ Others: _____

What is your key interest of joining the club? _____

Awards/ Achievements/ Special Area of Expertise: _____

Are you interested in speaking opportunity? Yes No

Topic: _____

Corporate Information



CEO Clubs Network®

Short description of your business: _____

Contract value in US Dollars: Less than \$ 15,000 \$ 15,000 to \$ 50,000 \$ 50,000 to \$ 100,000 \$100,000 to \$ 500,000
 \$500k - \$1 million \$1 - \$10 million \$10 - \$50 million \$50 - \$100 million \$100 - \$500 million Over \$500 million

How many employees are in your organisation?

Less than 50 50 - 200 201 - 500 Over 500

Your annual sales volume is: Less than \$5 million \$5 - \$25 million \$25 - \$75 million
 \$75 - \$200 million \$200 - \$500 million Over \$500 million

Do you own majority control of your business? Yes No

Is it a family-owned business? Yes No

Type of business:

Accounting Agriculture Art & Music Aviation Consulting Defense
 Energy Financial Services Government Entity HealthCare Hospitality Education
 Legal Services Logistic Manufacturing Media Gold & Mining IT
 Real Estate Retail Sports Trading Transportation Professional Services

Other (please specify): _____

Designated alternate representative: _____

PA/Secretary Name: _____ Mobile _____ Landline _____

Email: _____

Referred by if any: _____

Applicant Signature _____

Date _____

* Membership terms and conditions apply

For Official Use:

Membership Number: _____ Approved: _____ Date: _____

Membership Payment Received by Online payment Cheque Bank Wire Transfer Paypal
 App Payment Credit Card Other

Chapter: _____

Reference: _____