

# CORPORATECONCIERGE, inc.

## APPLICATION FOR MEMBERSHIP

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Title: \_\_\_\_\_ Years of Experience: \_\_\_\_\_

Company/Property Name: \_\_\_\_\_

Address: \_\_\_\_\_ Suite # \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code \_\_\_\_\_

Concierge Direct Phone #: \_\_\_\_\_ Email \_\_\_\_\_

Home Phone: \_\_\_\_\_ Fax Phone: \_\_\_\_\_

Supervisor Name: \_\_\_\_\_ Title: \_\_\_\_\_

E-mail: \_\_\_\_\_ Phone: \_\_\_\_\_

Concierge Office/Desk Location: \_\_\_\_\_ Desk Hours: \_\_\_\_\_

What are your primary duties as Concierge?
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Why do you want to become a member of Corporate Concierge, Inc.? ( <i>attach separate sheet if necessary</i> )

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Who referred you to Corporate Concierge, Inc.	
Name	Title
Company	Phone Number

Type of Concierge service: (check one)       Corporate       Residential  
    Retail      Civic

**Position Description:** Please attach a formal, detailed position description as prescribed by your employer, along with your:

- Business card
- Resume with current and past work history (6 months concierge experience required)
- Current concierge newsletter (if applicable)
- Two letters of recommendation (one from current employer/one from past employer/one personal),
- A check for \$200.00\* for Membership dues made payable "Corporate Concierge, Inc.". \*For the calendar year and are not pro-rated. *(Your check, will be held until your membership status has been determined. Should your application be denied, your check will be returned to you).*

***Membership requirements:*** As a networking organization, Corporate Concierge, Inc. strives to have active members that contribute to the growth and development of all the members. As a result, each member is required to attend at least one of the monthly meetings per quarter. These meetings are held on the first Wednesday of each month at 1:00 pm at various locations in the Metroplex. We also require that each member serve on one committee. Our committees enable us to participate in various philanthropic endeavors, as well as planning our annual Appreciation Luncheon, holiday party, mailing holiday cards among other activities. The time commitment varies. Often, all that is required is making some phone calls or addressing envelopes.

Signature\_\_\_\_\_ Date:\_\_\_\_\_

Please return your application, business card, references, and check to:

Doris Stout  
Vice President, Membership  
804 Dalworth Street  
Suite. A  
Grand Prairie, TX. 75050

Should you have any questions, please contact me at [doris@dallasconcierge.com](mailto:doris@dallasconcierge.com) or call me at 972-263-8847.

# **CORPORATECONCIERGE, inc.**

Thank you and we look forward to receiving your application.