



HoustonWAHMs
Houston Work-At-Home-Moms
22303 Bridgestone Palm Ct.
Spring, TX 77388

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Website: www.houstonwahms.org
Email: info@houstonwahms.org

Name _____
Address _____
City _____ State _____ Zip Code _____
Home Number _____ Business Number _____
Company Represented (limit 2) _____
Email Address _____ Website _____
Chapter location of membership requested _____
Who can we thank for referring you? _____

- I understand that all memberships in HoustonWAHMs chapters are non-refundable for any and all reasons. **Initial** _____.
- I agree to act in a professional manner at all times during HoustonWAHMs events. This includes but is not limited to chapter meetings, networking events and expos. I understand that I can and will be asked to leave for any unprofessional behaviors and that this can result in termination of my membership without refund. **Initial** _____.
- I agree to attend a minimum of ONE HoustonWAHMs Chapter event each month and understand if I fail to attend one chapter event within a 60-day period HoustonWAHMs can terminate my membership without refund. **Initial** _____.
- I understand that I may send someone (team member, downline, etc.) in my place to keep my membership current. I need to let someone know within 24 hours before the scheduled meeting time. **Initial** _____.

Membership renews on anniversary date each year and will be billed to address on file.

Signature of requesting member: _____ **Date:** _____

*All checks are to be made payable to **HoustonWAHMs**. Under **NO** circumstances do we accept cash or checks made out to other parties. To pay by credit card, please visit us online at www.houstonwahms.org/products. Credit cards are accepted thru PayPal.*