

# WeMAR Platinum Affiliate Requirements & Application

New Application   
  Re-Applying for New Year   
 Date you FIRST became a Platinum Affiliate \_\_\_\_\_

Please print and fill-out completely. Upon Board approval, the information provided below will be used for all Platinum Affiliate printed materials.

Full Name \_\_\_\_\_ Company \_\_\_\_\_  
 Company Address / Suite # \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Work Phone / Ext. # \_\_\_\_\_ Fax \_\_\_\_\_ Cell Phone \_\_\_\_\_  
 Email \_\_\_\_\_ Website \_\_\_\_\_

**REQUIREMENT: Attendance of Affiliate Meeting**

To obtain and maintain Platinum Affiliate status, you must attend at least eight (8) of the eleven Affiliate Committee meetings in a calendar year. The committee will accept no more than three (3) absences per calendar year. You must be present for the entire meeting and all dates must be verified by the committee chairperson or WeMAR liaison.

|                           |                                 |                            |                                 |                            |                                 |                           |                                 |
|---------------------------|---------------------------------|----------------------------|---------------------------------|----------------------------|---------------------------------|---------------------------|---------------------------------|
| 1. _____<br>Date Attended | _____<br>Verification Signature | 2. _____<br>Date Attended  | _____<br>Verification Signature | 3. _____<br>Date Attended  | _____<br>Verification Signature | 4. _____<br>Date Attended | _____<br>Verification Signature |
| 5. _____<br>Date Attended | _____<br>Verification Signature | 6. _____<br>Date Attended  | _____<br>Verification Signature | 7. _____<br>Date Attended  | _____<br>Verification Signature | 8. _____<br>Date Attended | _____<br>Verification Signature |
| 9. _____<br>Date Attended | _____<br>Verification Signature | 10. _____<br>Date Attended | _____<br>Verification Signature | 11. _____<br>Date Attended | _____<br>Verification Signature |                           |                                 |

**REQUIREMENT: Actively Participate in at least one Committee or Workgroup (other than Affiliate Committee)**

You must be present for the entire meeting. All participation must be verified by the committee or workgroup chairperson or WeMAR liaison. (Attach additional verification.)

|                                   |                        |                                 |                                   |                        |                                 |
|-----------------------------------|------------------------|---------------------------------|-----------------------------------|------------------------|---------------------------------|
| 1. _____<br>Committee / Workgroup | _____<br>Date Attended | _____<br>Verification Signature | 2. _____<br>Committee / Workgroup | _____<br>Date Attended | _____<br>Verification Signature |
| 3. _____<br>Committee / Workgroup | _____<br>Date Attended | _____<br>Verification Signature | 4. _____<br>Committee / Workgroup | _____<br>Date Attended | _____<br>Verification Signature |
| 5. _____<br>Committee / Workgroup | _____<br>Date Attended | _____<br>Verification Signature | 6. _____<br>Committee / Workgroup | _____<br>Date Attended | _____<br>Verification Signature |
| 7. _____<br>Committee / Workgroup | _____<br>Date Attended | _____<br>Verification Signature | 8. _____<br>Committee / Workgroup | _____<br>Date Attended | _____<br>Verification Signature |

**REQUIREMENT: Sponsor and/or Volunteer at Events and/or Sponsor classes per calendar year**

You must sponsor and/or volunteer a minimum of four (4) events and/or sponsor a minimum of four (4) classes per calendar year. All activity must be verified by the committee chairperson or WeMAR liaison.

|                                     |               |                                 |                                     |               |                                 |
|-------------------------------------|---------------|---------------------------------|-------------------------------------|---------------|---------------------------------|
| 1. _____<br>Name of Education Class | _____<br>Date | _____<br>Verification Signature | 2. _____<br>Name of Education Class | _____<br>Date | _____<br>Verification Signature |
| 3. _____<br>Name of Education Class | _____<br>Date | _____<br>Verification Signature | 4. _____<br>Name of Education Class | _____<br>Date | _____<br>Verification Signature |
| 5. _____<br>Name of Event           | _____<br>Date | _____<br>Verification Signature | 6. _____<br>Name of Event           | _____<br>Date | _____<br>Verification Signature |
| 7. _____<br>Name of Event           | _____<br>Date | _____<br>Verification Signature | 8. _____<br>Name of Event           | _____<br>Date | _____<br>Verification Signature |

**APPROVAL:**

Applicants meeting all listed requirements must complete and submit the application for approval. Applicants must be WeMAR members in good standing. Final approval is granted by the WeMAR Board of Directors. Platinum Affiliate members at risk of losing their Platinum Affiliate status will receive a written 10 day notice to reconcile their status. Unresolved Platinum Affiliate membership will terminate automatically.  I have read the above, understand and agree to the terms.

Affiliate Member \_\_\_\_\_ Date \_\_\_\_\_  
 WeMAR CEO \_\_\_\_\_ Date \_\_\_\_\_  
 Affiliate Committee Chairperson \_\_\_\_\_ Date \_\_\_\_\_

**FOR WeMAR USE ONLY**

Member in Good Standing Y / N \_\_\_\_\_

WeMAR Board Approval Y / N \_\_\_\_\_

Date \_\_\_\_\_ Initials \_\_\_\_\_



FAX COMPLETED FORM TO : 623.931.1008  
Attn: Lori Scardina