

Marketplace Coalition



Marketplace Huddles - 5th Degree Participant Covenant

Please complete, agree and sign the following application form

Name _____ Position _____
Organization Name _____ \$295/month \$195/month (Non-Profit)
Mailing Address _____ City _____ State ____ Zip _____
Cell Phone _____ Work Phone _____
Website _____ Email _____
Number of Employees ____ Years in Operation ____ Owner? Yes No Manager? Yes No
Classification/Ministry Focus/Denomination _____

1. **Attendance.** Attendance is mandatory for 12 months. Excused absences are illness or family emergencies. If you travel frequently for your work, and cannot schedule around meetings, this program is not for you.
2. **Confidentiality.** 5th Degree is like Vegas. What happens, or is said in a Huddle or between participants, stays confidential. Breaching confidentiality may result in immediate expulsion without refund.
3. **Payments.** Payments can be made monthly (\$295 or \$195) or annually (\$3,540 or \$2,340). If you select the monthly option, payments are due on the first of each month. Payments are late by the 5th of the month and subject to a \$20.00 late fee.
4. **Accountability.** Participants will email weekly scorecards to each other on a day decided upon by the Huddle. Each Huddle shall determine the penalty for a late scoreboard. If a participant has more than three late scoreboards in a quarter, he or she may be expelled. Preparation and participation is expected in a Huddle. The Presenter of a Huddle Feedback session is expected to email the presentation the day prior to the meeting. Huddle participants are expected to review the presentation and come prepared with questions, behavioral examples and comments.

Credit/Check Card # _____ - _____ - _____ - _____ Expires ____ / ____
Name on Card _____ Security Code _____
Billing Address _____ City _____ State ____ Zip _____

I agree to participate in the Serving Our Neighbors – Marketplace Coalition – 5th Degree Huddle Program over the next 12 months & to the 4 covenant points listed above. I grant permission for Serving Our Neighbors to email us & market our names and/or organization's name on their website, directories & in various print media. I also agree to the Serving Our Neighbors - Code of Ethics & Social Covenant.

Signature (for Huddle Access & Credit/Check Card) Title Date

If I am not authorized to agree to the marketing of my work, business or organization on Serving Our Neighbor's website, directories or in various print media, the following manager agrees to allow our work, business or organization's name to be marketed on the website, directories & in various print media.

Manager's Name Title Date

Describe your organization and your role

Past job / work / business experience

Expectations of the 5th Degree Program

What is taking place now that is drawing you to the 5th Degree Program?

References

Name _____ Relationship _____

Email _____ Phone _____

Name _____ Relationship _____

Email _____ Phone _____

Application is Accepted by _____ Rejected by _____ Date _____
DISC Assessment _____ Group _____ Facilitator _____