



World Investigators Network, Inc.

An Elite Association of Investigators & Security Professionals

Application for Membership

Please read carefully. Type or print all answers in full. Return application to: Executive Secretary, 7501 Sparrows Point Blvd., Baltimore, MD 21219 (USA). Dues in the amount of \$125 US dollars must be paid at the time of application. Accepted methods of Payment are; Credit Card, Check, Money order or bank draft (payable in US dollars and drawn on a US or corresponding bank) for US\$125. In the event the applicant is not approved, the annual dues of \$125. will be refunded to the applicant. An entrance fee in the amount of \$50 is required for reference and background check. Application cannot be processed unless all questions are answered in full and fees are paid.

Personal Information:

Full name of applicant:

Address:

Postal Code / City:

Country / State:

Residence telephone no:

Material Status:

Spouse:

Birthplace / Date of Birth:

Citizenship:

Height / Weight:

Hair / Eyes:

Company Information

Company or Agency Name:

Business address:

Postal Code / City:

Country / State:

Business Telephone:

Business Fax:

E-mail:

Web site:

If co-partnership, limited firm or corporation, list names of partners or company directors:

Co-partner(s):

Officers:

Date Agency Established:

Date of hire with above business:

How long in Profession:

Is the Agency subject to licensing regulations? YES NO

If yes, list full name & address of licensing authority below

License number:

Date Issued:

Expiration Date:

Please inclose a photocopy of your license if applicable

Is the Agency license under suspension now, or has it ever been? YES NO

Have you ever been convicted in any criminal proceeding? YES NO

If yes to either 10 or 11 explain on separate sheet

Are you bonded? YES NO

Insured? YES NO

If yes to either, Please return photocopy of binder page.

Type of work handled, list in order of specialty. Limit list to 20 Codes. (See list of W.I.N. Specialty Codes)

Do you have a full-time office? YES NO

Do you have branch offices? YES NO

If yes, list address, phones, fax etc. If more space is needed use a separate sheet.

Branch 1:

Branch 2:

Branch 3:

List professional organizations or associations in which you now hold membership:

If accepted into membership, do you agree to abide by the by-laws and code of ethics of World Investigators Network?

YES NO

List 3 business references one of which can be your financial institution or bank.

please list complete mailing address and phone numbers

If you wish World Investigators Network, Inc. laminated ID card, please include 2 passport size photos and one will be mailed to you.

I want an ID card and I enclose 2 photos: YES NO

(must be signed)

AFFIDAVIT/WAIVER/AGREEMENT

I do hereby swear or affirm that I am not, nor have I ever been, engaged or affiliated with subversive activity directed against the government of my country or any other free world country. I certify that all entries contained herein are true, complete and correct to the best of my knowledge and are made in good faith. I also give my full consent to World Investigators Network, Inc. its Officers or their agents to investigate this application and inquire into my reputation, character and fitness for membership. I hereby release the above named organization, its officers, members and/or agents from all liability, claims, injuries (implied or actual) in matters emanating from such investigation. I further agree that if my membership is not approved for any reason, I will accept the decision and take no action, legal or otherwise, against the Association as a whole, its officers, directors, members or agents.

Date: _____ Signature: _____

Applicant Invited/proposed By: _____

Please charge the dues and application fee to my credit card. Amount to be charged:

\$175.00

Name on Card: _____

Credit Card: American Express Master Card VISA

Credit Card Number: _____ - _____ - _____ - _____

Exp. Date: _____ / _____

For office use only			
References Checked:		Verified or copy attached:	
Insurance or Bonding Verified:			
Approval Date:		Approved by:	

Please fax the application to the following number: **001-410-388-0846** or send it by mail to our Executive Secretary:

Mrs. Carolyn Ward
7501 Sparrows Point Blvd.
Baltimore, MD 21219 USA

If you have any questions don't hesitate to contact us under the following number: 001-410-477-8879