

[Insert Date]

Dear [Name of Applicant],

Thank you for expressing an interest in joining our BNI® Chapter. The Membership Committee has reviewed your Membership Application and has decided to return your application and participation fees. We have determined that your classification is in conflict with that of an existing member and, as the policy of BNI® is one person per professional classification, we are unable to accept your application.

Your information may be kept on file and you may be contacted should the position become open. If you wish to be considered by another chapter of BNI®, please contact the BNI Regional Office at [Insert phone number or website].

Again, thank you for your interest in BNI®.

Sincerely,

The Membership Committee

BNI® \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Chapter

cc: BNI® Chapter President

BNI® Regional Office

BNI® Director/Director Consultant