



CONFIDENTIAL - MASTERMIND COACHING APPLICATION

Name _____ **Spouse Name** _____

Business Name _____

Business Street Address _____

Years in Current Business _____ **Business Phone** _____

Spouse is: _____ **Active in business** _____ **Inactive in business**

Option: Home Street Address _____

Option: Home Phone _____ **Fax** _____

Email _____

BRIEFLY DESCRIBE CURRENT BUSIENSS (AND ATTACH ONE BROCHURE, SALES LETTER OR OTHER DOCUMENT REPRESENTATIVE OF YOUR BUSINESS)

Please rank each of the following marketing-oriented items according to the difficult or challenge they currently represent to you; rank EACH ONE on a 1-5 scale, 1=Insignificant, to 5=Very Significant. ALSO, number the ten most important items to you 1-10, 10=most important of all.

<u>No.</u>	<u>Ranking</u>				
_____ Advertising effectively	1	2	3	4	5
_____ Generating sufficient QUANTITY of leads/clients	1	2	3	4	5
_____ Generating satisfactory QUALITY of leads/clients	1	2	3	4	5
_____ Converting leads to sales/clients	1	2	3	4	5
_____ Controlling costs of advertising, lead generation, client acquisition	1	2	3	4	5
_____ Client retention	1	2	3	4	5
_____ Stimulating repeat business from clients	1	2	3	4	5
_____ Stimulating referrals from clients	1	2	3	4	5

_____ Clarifying my USP, Positioning, Marketing Messages	1	2	3	4	5
_____ Creating compelling offers	1	2	3	4	5
_____ Responding to marketplace changes, competition	1	2	3	4	5
_____ Taking advantage of new opportunities, new technologies	1	2	3	4	5

Please rank each of the following business and financial-oriented items according to the difficulty or challenge they currently represent to you; rank EACH ONE on a 1-5 scale, 1=Insignificant, to 5=Very Significant. ALSO, number the ten most important items to you 1-10, 10=most important of all.

<u>No.</u>	<u>Ranking</u>				
_____ Finding time to implement new/improved marketing strategies	1	2	3	4	5
_____ Getting employees and/or associates "on board" with my marketing approach	1	2	3	4	5
_____ Clarifying and staying on track toward definite goals and objectives	1	2	3	4	5
_____ Managing my time	1	2	3	4	5
_____ Conquering procrastination	1	2	3	4	5
_____ Hiring/training/managing employees	1	2	3	4	5
_____ Monitoring and evaluating important data, statistics, information in my business	1	2	3	4	5
_____ Setting, selling and commanding premium prices for my products/services	1	2	3	4	5
_____ Maintaining satisfactory business profits	1	2	3	4	5
_____ Extracting sufficient money from my business to wisely invest, build wealth	1	2	3	4	5
_____ Taking a satisfactory amount of time off, away from my business	1	2	3	4	5
_____ Having a long-term retirement/exit strategy	1	2	3	4	5

DO YOU REGULARLY OR FREQUENTLY USE:

Direct-Mail	_____ YES	_____ NO
Broadcast VOICE	_____ YES	_____ NO
Web Site	_____ YES	_____ NO
E-Mail	_____ YES	_____ NO
Print Media Advertising, Local	_____ YES	_____ NO
Print Media Advertising, National	_____ YES	_____ NO
Radio/TV Advertising, Local	_____ YES	_____ NO
Radio/TV Advertising, National	_____ YES	_____ NO
Publicity/News Releases, Local	_____ YES	_____ NO
Publicity/News Releases, National	_____ YES	_____ NO
Newsletter	_____ YES	_____ NO
Joint Ventures with other businesses	_____ YES	_____ NO
Personal Networking	_____ YES	_____ NO
Tele-Marketing	_____ YES	_____ NO

HOW MANY MARKETING STRATEGIES OR SYSTEMS DO YOU HAVE IN PLACE THAT CONSISTENTLY GENERATE NEW BUSINESS FOR YOU? _____

HOW MANY MARKETING STRATEGIES OR SYSTEMS DO YOU HAVE IN PLACE THAT CONSISTENTLY STIMULATE REPEAT BUSINESS, LOCK IN CONTINUING OR RENEWABLE INCOME AND/OR STIMULATE REFERRALS? _____

DESCRIBE 3, 4, OR 5 MAJOR GOALS YOU ARE WORKING TOWARD:

#1: _____

#2: _____

#3: _____

#4: _____

#5: _____

DESCRIBE 3 MAJOR SOURCES OF STRESS, FRUSTRATION OR UNHAPPINESS THAT INTERFERE WITH YOUR PRODUCTIVITY AND ROB YOU OF PEACE OF MIND

#1: _____

#2: _____

#3: _____

YOUR SCHEDULE

Number of hours you work, average week _____

Number of hours you'd prefer to work, average week _____

% of work-time you rank as productive _____

No. of hours per week you work "on" vs. "in" your business _____

No. weeks vacation taken: 2006:_____ 2007:_____ 2008:_____ No. weeks vacation you'd prefer taking_____

RANK YOURSELF IN DIRECT MARKETING EXPERIENCE: (Mark one)

_____ Very knowledgeable; serious student; very active in using strategies

_____ Very knowledgeable; serious student; but not very actively implementing

_____ Somewhat knowledgeable, actively implementing

_____ Somewhat knowledgeable but not very actively implementing

_____ A relative novice

Why do you want to participate in the Mastermind Coaching Program?

Mastermind Group

I _____ enroll* in the Glazer-Kennedy Insider's Circle™ Rhode Island Chapter MASTERMIND Group and authorize the monthly credit card charge of \$297.00 per month. I understand that this commitment continues until I provide 30 days quit notice. I warrant the information I have provided on the accompanying Application is accurate.

I authorize the following charge on the credit card information below:

\$297.00 monthly beginning upon the first month of acceptance.

Name: _____

Company: _____

Phone: _____ Fax: _____

Email: _____

Credit card: __ Visa __ MasterCard __ AmEx Card #: _____

Billing address: _____

City: _____ State _____ Postal Code _____

Expiration: _____ 3 or 4 digit security code on front/back or card: _____

SIGNATURE (required): _____ DATE: _____

*Subject to acceptance

NOTICE: After acceptance, all payments made are non-refundable. RNTS Inc. reserves right to cancel the Rhode Island Chapter Mastermind Group at any time. RNTS Inc reserves right to accept/reject or terminate participants without explanation as to criteria or cause. Applicant understands they can cancel their commitment with 30 days notice. Applicant acknowledges that no guarantees expressed or implied, concerning specific results to be achieved via participation were relied on in the applicant's decision to participate. **Participants agree that they will maintain Gold Luxury Membership or higher in Glazer-Kennedy Insider's Circle.** Participants acknowledge that advice and information provided via a Glazer-Kennedy Insider's Circle™ Rhode Island Chapter Mastermind Group is not intended as or to be considered as substitute for legal, accounting or other, similar professional advice or service from the proper professional. Further, RNTS Inc does not accept any responsibility or liability for individual participants' particular interpretations, uses, or applications of information provided, and participants indemnify RNTS Inc from any such liability.

Mail Application and Collateral Material to:
 Michael Brier
 381 Wickenden Street
 Providence, RI 02903

Or...Fax entire application to 401-521-5844