



CONFIDENTIAL – MASTERMIND/KENNEDY STUDY GROUP APPLICATION

Name _____ Spouse, Partner Or Guests 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 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 STIMULATES 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: 2004: _____ 2005: _____ 2006: _____ 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?

Please Fill out Completely and Sign, then fax it to 585-586-5008 or mail it to

Metaview Communications 66 Glen Rd Rochester NY 14610

If Selected For The One Year Local Mastermind Group, Which Payment Will You Select?

_____ \$297/mo \$397/mo \$497/mo _____ Annual Fee of \$2997/\$3997/\$4997 (Save \$594-994)

Name: _____ Business Name: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ E-Mail Address: _____

PAYMENT METHOD: American Express Visa Master Card Discover Check or Paypal

Card #1 _____ 3 Or 4 Digit Security Code _____ Exp. Date: _____

Alternate Card # _____ 3 Or 4 Digit Security Code _____ Exp. Date: _____

Signature of Cardholder : _____

By signing you agree to allow Metaview Communications to charge your credit card upon acceptance into the mastermind group and agree to pay for the entire program regardless of your individual circumstances, your activity level in the program, your attendance at meetings, etc. By signing you have an obligation to pay the entire cost for the year of training regardless of your circumstances. By signing above, cardholder authorizes Metaview Communications to process each monthly installment pertaining to above and in accordance with cardholder agreement. Listing an alternate card is requested to avoid additional charges. Note: Any returned check or inability for Metaview Communications to collect monthly fee from credit card is subject to a non-refundable \$25 service fee.