



California Bankers Association Affiliate Membership Application

Please type or print clearly

Application Date: _____

Organization Name: _____

Address: _____

City: _____ State: _____ Zip+4: _____

Primary Contact: _____ Title: _____

Telephone: _____ Fax: _____

E-mail Address: _____

Secondary Contact: _____ Title: _____

Telephone: _____ Fax: _____

E-mail Address: _____

Company Website: _____

Affiliate Membership – Reserved for organizations or individuals that provide significant and ongoing services or products to the California banking industry. (CBA Senior Management Approval Required)

- 1) I understand that the membership dues are payable upon receipt of the annual invoice unless written notice is submitted to CBA of our intent to cancel membership immediately upon receipt of the annual invoice.
- 2) Upon approval of affiliate membership:
 - a. It is understood and agreed that no endorsement of the affiliate members' products and services are implied or intended.
 - b. It is understood and agreed that CBA affiliate membership does not include permission to use of the CBA logo.

Authorized Signature

Date

Dues to the California Bankers Association are not deductible as a charitable contribution for federal income tax purposes, but may be deductible as an ordinary and necessary business expense. A portion of the dues, however, is not deductible as an ordinary and necessary business expense to the extent that the California Bankers Association engages in lobbying. The non-deductible portion of dues for the period January 1 to December 31 (of the current year based on application date) is 30%.

EMAIL OR MAIL APPLICATION TO:

FOR CBA USE ONLY

California Bankers Association
ATTN: Rosemary Mignano
1303 J Street Suite 600
Sacramento, CA 95814-2939
rmignano@calbankers.com
T: (916) 438-4435

BATCH#: _____ DUES: _____
CK#: _____ PAC: _____
AMT: _____ PAF: _____
CORPORATE: PERSONAL:
DATE ISS: _____ BY: _____
DATE DEP: _____

MEMBER ID: _____
APPROVAL DATE: _____
DATE RECEIVED: _____

