



CABB offers a **Corporate Membership** category for those looking to enhance the return on their company's investment. With corporate membership, multiple brokers from one organization get access to CABB membership benefits at discounted rates. Additionally, as a corporate member, your organization gets enhanced visibility with your CABB member constituents and industry peers.

#### Benefits

- **Corporate Membership includes one membership for the primary agent.**
- Each additional member of the company receives a discounted membership fee of \$325.
- The company can advertise 'CABB Corporate Member' on their Web site, business cards, etc.
- **New!** Includes full membership with IBBA with benefits.

#### Requirements

- The lead member of the company must complete and submit the CABB corporate membership application form to CABB Headquarters with the \$499 membership fee.

#### Notes

- A "Corporate" membership applies to a single corporation or ownership entity. Therefore, if a corporation (or ownership entity) has multiple locations, then a single corporate membership is all that is necessary to provide the reduced membership rate to all associates at each location. However, individual franchised corporate offices require a separate application and appropriate dues fee.
- A corporate member may add associates to the corporate membership at any time but must pay the fee with a company check or credit card.
- If a company decides to take advantage of the corporate membership after July 1, they will pay a prorated fee.
- No substitutions or refunds regarding the corporate membership.
- If an associate leaves the employ of a corporate member, the discounted membership will not be renewed the following year unless they are a member of another company with a corporate membership.
- If an associate leaves the employ of a corporate member, they will retain their corporate membership through their paid-through date. Full dues will be required for the following year.

**- Sign up Today by filling out the application form! -**



## Corporate Membership Application

**Terms:** Corporate memberships are available to multiple business brokers within the same corporation. Each primary contact of a corporate membership will be listed in a separate corporate membership listing and is entitled to all individual member privileges. Each additional broker from the same member firm will be listed as an individual and are entitled to the same member privileges. When a company has multiple offices, as long as they are all owned by that same company, all offices will be able to share one corporate membership. **PLEASE NOTE: MEMBERSHIP REFUNDS OR SUBSTITUTIONS ARE NOT AVAILABLE FOR EMPLOYEE TERMINATIONS WITHIN A CORPORATE MEMBER FIRM.**

**Annual Dues:** (Membership is based upon a calendar year and will expire on 12/31):  
Corporate membership (Includes 1 primary contact) \$499.00 / Additional Associates \$325 (each)

**Mandatory Requirement to Maintain Active CABB Membership Status:**

Completion of CABB 101 Introduction to Business Brokerage (2 Day Course) **within 9 mos.** of joining CABB. We will alert you to upcoming courses via our CABB Weekly Connection e-newsletter and posting to Upcoming Events page on CABB Website.

**Corporate Member Information:** (to be completed by Primary Contact)

Please provide the information below as you would like it to appear in the CABB Online Directory:

Business Name:		Corporation/Owner name (if different):	
Primary Contact Name:		Title:	
Have you previously held CABB membership?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
		Year last held:	
Address:		City:	State:
Zip Code:	County:	Email:	
Phone:		Fax:	
<b>Additional Associates Information:</b>			
NUMBER OF ASSOCIATES FROM SAME CORPORATION _____ x \$325 = \$ _____ Please complete the company roster with names and contact information for each additional broker member.			
<b>Payment Information</b> All corporate members and additional associate memberships must be paid by a corporate check or credit card and company roster must be completed for membership consideration.			
AMOUNT: \$499 + _____ (Additional Memberships) = <b>TOTAL AMOUNT \$</b> _____			
<input type="checkbox"/> CHECK Please Make checks payable to CABB.			
Card Number:		EXP:	Security Code:
Cardholder's Name:			
Billing Address:		City:	State:

**As the Primary Contact please fill out the 2019 Membership Application to provide information as you would like it to appear in the CABB Online Directory:**



## Corporate Roster

Please include all contact information for each additional broker from same corporate member firm. If your company has more than four additional brokers under the same corporate member firm, please attach additional roster. In addition to completing the information below, all new broker members are required to submit an Individual Corporate Membership Application.

<b>1.</b>	Name:					
	Address:			City:		State/Province:
	Zip Code:	County:	Phone:	Fax:		
	Email:			License #:	License Expiration:	
<b>2.</b>	Name:					
	Address:			City:		State/Province:
	Zip Code:	County:	Phone:	Fax:		
	Email:			License #:	License Expiration:	
<b>3.</b>	Name:					
	Address:			City:		State/Province:
	Zip Code:	County:	Phone:	Fax:		
	Email:			License #:	License Expiration:	
<b>4.</b>	Name:					
	Address:			City:		State/Province:
	Zip Code:	County:	Phone:	Fax:		
	Email:			License #:	License Expiration:	