



# Membership Application

Business Name \_\_\_\_\_

Contact Person \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ County \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_ Web Site \_\_\_\_\_

Type of Business \_\_\_\_\_

Number of Full-Time Employees \_\_\_\_\_ Referred by\* \_\_\_\_\_

- |   |           |
|---|-----------|
| Membership Categories:                                      | dues only |
| <input type="checkbox"/> Business with 1-5 employees        | \$100     |
| <input type="checkbox"/> Business with 6-10 employees       | \$200     |
| <input type="checkbox"/> Business with 11-25 employees      | \$250     |
| <input type="checkbox"/> Business with 26-50 employees      | \$300     |
| <input type="checkbox"/> Business with 51 or more employees | \$350     |
| <input type="checkbox"/> Individual membership              | \$100     |
| <input type="checkbox"/> Youth membership                   | \$25      |

Payment by  Cash  Check  Invoice

### Businesses you can refer to TIBA\*

Name \_\_\_\_\_ Business Name \_\_\_\_\_

Address \_\_\_\_\_ Email \_\_\_\_\_

Name \_\_\_\_\_ Business Name \_\_\_\_\_

Address \_\_\_\_\_ Email \_\_\_\_\_

\* TIBA members receive a \$25 credit on their dues for every new member who joins TIBA as a result of their referral.