



Associate Membership Application

All applications must be approved by the CBA Executive Council

Associate Membership Level: Please check the level of Associate Membership you are applying for:

%Classic+Associate Membership **%Executive**+Associate Membership

Please refer to Associate Membership Levels brochure for detailed information

Company Information:

Company Name: _____

Mailing Address: _____

Street Address: _____

Website Address: _____

City: _____ St: _____ Zip: _____ E-Mail: _____

Telephone: _____ Fax: _____

Principal Contacts

1. _____
First Middle initial Last Position Title

2. _____
First Middle initial Last Position Title

Above person to whom CBA Magazine and other correspondence should be addressed:

1. 2.

Other Offices

Company Name: _____

Mailing Address: _____

Street Address: _____

City: _____ St: _____ Zip: _____ E-Mail: _____

Telephone: _____ Fax: _____

Contact Name: _____ Title: _____

Please send newsletter and communications to this location (an additional \$49 charge)



Associate Membership Application

All applications must be approved by the CBA Executive Council

Please give a brief description of your company, its history and the products you want our member banks to know about. Your company description will be used in CBA's annual directory and on CBA's website, please keep description between 100 and 120 words; we will not edit this information so please proof carefully.

Associate Members may not advertise or publicize membership, except with prior written consent of the CBA, or use the CBA name or logo to represent or imply in any way that the CBA endorses Associates or their products or services. Associate Members are not entitled to vote or hold office.

I hereby apply for Associate Membership in the Community Bankers Association of Kansas and consent to abide by the above.

Signature: _____

Date: _____

Please mail, fax or e-mail information to the following:

Community Bankers Association
ATTN: Yvonna Hansen, Director of Marketing
3003 SW Van Buren, Suite A
Topeka, KS 66611-2224
Fax: (785) 271-1508
E-mail: yvonna@cbak.com

Associate Member Dues Options – "Classic"- \$500/year; "Executive"- \$1500/year
(We will invoice you once your application has been approved.)