



COLORADO ASSOCIATION OF BUSINESS INTERMEDIARIES

APPLICATION FOR MEMBERSHIP

Name: _____ Date: _____

Company: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Email: _____

Website: _____

Affiliations: IBBA M&A Source Other: _____

Designations: CBI M&AMI Other: _____

Annual Dues:

\$85.00 Broker Member (Broker/Intermediary) For Year: _____
(You must be a licensed Colorado Real Estate Broker)

Real Estate License #: _____ Expiration Date: _____

For renewing Brokers. Please indicate your recent industry involvement (not required):

I took an IBBA Course: Course # _____ Date: _____

I attended an IBBA Conference Dates: _____

I was a CABI Board Member/Officer: Title: _____ Year: _____

\$150.00 Associate Member (Non-Broker/Intermediary) For Year: _____

Total Enclosed: \$ _____ VISA/MC Check (choose one)

VISA/MC #: _____ CVC _____ Expiration Date: _____

Signature: _____

For Office Use Only: Captured no. _____ Reference no. _____

Date Paid: _____ Amount: \$ _____ Form of Payment: _____

VISA/MC: Please email, mail or fax application and copy of real estate license (if Broker Member) to: OR

CHECKS: Please mail check, application and copy of real estate license (if Broker Member) to:

Colorado Association of Business Intermediaries
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Boulder, CO 80301
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Fax: 866-310-1376
Email: merle@businesssolutionsadvisory.com