

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:	
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 ☐ AMEX ☐ Check (choose one)
VISA/MC/AMEX #:	CVC Expiration Date:
Signature:	
For Office Use Only: Captured no.	Reference no.
Date Paid: Amount: \$	Form of Payment:
WOADO/AMEY Disease " (" " " "	Colorado Association of Business Intermediaries

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:

c/o Dennis Smith CBI

116 Inverness Drive East, Suite 205

Englewood, CO 80112 Office: 303-799-9111 Fax: 303-799-9333