CALIFORNIA YACHT BROKERS ASSOCIATION

AFFILIATE BUSINESS

MEMBERSHIP APPLICATION

Please print clearly or type your information – all requested information must be filled out before submission					
Your Name		Cell Phone			
Name of Business		Position			
Business Address					
City		State		Zip	
Website					
Business Phone		Email			

How did you hear about, and who referred you to the CYBA?

What is your primary reasons for wanting to join the CYBA?

Would you be interested in serving on a CYBA Committee?

☐ Boat Show	☐ Ethics	☐ Forms	☐ Geo	☐ Legal Seminar
☐ Legislative	☐ Membership	☐ Newsletter	☐ Social Events	☐ Social Media

Please provide name and details for current CYBA Broker sponsors. Requires Sponsor's Signatures!			
Sponsor Name (CYBA Broker)		Phone	
Signature		DBW License No	

Membership Fee Schedule	Initiation Fee	Yearly Dues	Total
Sign-Up during January - June	$195.00	Full year: $195.00	**$390.00**
Sign-Up during July - December	$195.00	Half year: $97.50	**$292.50**

☐ Please check the box if you are willing to provide an additional $100 of which will be applied to the CYBA Legacy Fund/Legal Defense Fees.

HOW TO SUBMIT YOUR COMPLETED APPLICATION!

To pay with Credit Card: Email completed application to: MarkPWhite@cyba.info,
then call Mark P. White, Executive Director, at 310-968-9376 with credit card information.
To pay with check: Mail complete application with check to: CYBA, PO Box 4129, Oceanside, CA 92052

Upon approval, I understand that annual CYBA membership dues are billed in December for the forthcoming year and are considered past due on January 30th. I agree that my CYBA membership will be canceled if my full payment for the new year is not received by February 15th.

Applicant's Signature_____ **Date**_____

Thank you. You will be notified once your completed application has been reviewed.

Upon approval, please consider the CYBA Sponsorship Programs that are available to help promote your business to CYBA Brokers and Salespersons.

Rev 1/25