

## Business Membership Application

**Business Membership** in CIBA is open to any local independent business operated by Corvallis area residents with substantial authority to make independent decisions about their business operations. CIBA's Mission and Goals Statement is included with this application for your reference.

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Business Name

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Owner/Officer	Title	City of Residence
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Manager or Contact	City of Residence
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Street Address, City, State, Zip	Mailing Address (if different than street address)
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Work Phone	Home Phone (optional)
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General email	Member Representative email
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Website	FAX Number
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**Please describe your business:**

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**Independence is an important aspect of the businesses that belong to CIBA. However, we recognize that few businesses are 100% independent in all matters. The following qualities help define an independent business. Your answers below will provide the CIBA Membership Committee an overview of your business.**

The following information will not be used for or be made available to the public.

Information designed to promote your business will be requested at a later date for use on the CIBA Web site.

**As an owner or manager of your business, you have autonomy regarding:**

	N/A	Never	Usually	Always
Advertising	_____	_____	_____	_____
Purchasing	_____	_____	_____	_____
Design	_____	_____	_____	_____
Appearance	_____	_____	_____	_____
Product mix/formulas	_____	_____	_____	_____
Personnel	_____	_____	_____	_____
Location	_____	_____	_____	_____

Please explain any items checked "never" or "usually."

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**Annual Membership Dues:**

Business Membership 0 – 14 full time equivalent (FTE)	\$100.00
Business Membership 15 FTE or more employees	\$150.00

**Membership Agreement**

I agree to:

- Inform my employees of my membership in CIBA and help them understand how to promote locally owned, independent businesses. (CIBA can offer support, if needed.)
- Prominently display the CIBA logo in my business and make CIBA Membership Guides available to my customers. I understand that through our joint efforts to market and promote our homegrown businesses, we will all benefit.
- Promote quality service and integrity as key components in the mutual success of CIBA and my business.
- Promote the future of CIBA by voting for the Board of Directors, and as able, take advantage of other opportunities to participate in CIBA. Such opportunities would include attending CIBA sponsored events and quarterly membership meetings, and participating on advisory committees or the Board of Directors.
- Notify CIBA if I should have any issues with my membership.
- Promptly remit my renewal and dues to save our combined resources.

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Business Owner / Officer / Manager Signature	Title	Date
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Approved by CIBA Board of Directors:

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CIBA Membership Committee Representative	Date
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**Please send application and membership fee to:** Corvallis Independent Business Alliance, c/o A & S Accounting, 316 Washington Avenue, Corvallis OR 97333. Questions? 541-752-0047 or info@CorvallisIBA.org.

All membership applications and continuation of memberships are subject to CIBA Board discretion and approval. A membership packet will be provided to you upon acceptance of membership and deposit of dues.

Payment Receipt:                      Date \_\_\_\_\_                      Check # \_\_\_\_\_                      Treasurer's Initial: \_\_\_\_\_



## **Mission Statement**

The Corvallis Independent Business Alliance is a voluntary, cooperative effort of independent, local businesses who use education, networking, political advocacy, and citizen involvement to help our community prosper and contribute to a diverse, healthy, and stable local economy.

## **Goals**

1. Increase community awareness of the value of supporting independent, local businesses.
2. Increase patronage of independent, local businesses.
3. Provide members with the advantages of cooperation without compromising independence.
4. Influence local government policies to encourage and nurture an environment for independent, local businesses.
5. Encourage diversity of choice and character in the independent, local business community.
6. Increase the number of independent, local businesses in our community.
7. Encourage and support independent, local business alliances in neighboring communities.
8. Invite independent, local businesses to join CIBA.

Adopted 5-12-02

**Visit our website at [www.CorvallisIBA.org](http://www.CorvallisIBA.org)  
For more information contact CIBA at [info@CorvallisIBA.org](mailto:info@CorvallisIBA.org) or call 541-752-0047**