

**CNYIBA ALLIANCE SERVICES PARTNER**

**Membership application**

**Company details**

|  |  |
| --- | --- |
| Company Name |  |
| Billing address Street |  |
| City |  |
| State and Zip code |  |
| Company main telephone number |  |
| Company website | **www.** |
| Company Industry type |  |
| Company NAICS code |  |
|  |  |
| What you company main line of business? |  |
| Number of employees |  |
| Total annual sales |  |
|  |  |

**Primary Contact details**

|  |  |
| --- | --- |
| Primary Contact name |  |
| Title |  |
| Email |  |
| Landline |  |
| Cell number |  |

**Secondary contact details**

|  |  |
| --- | --- |
| Contact name |  |
| Title |  |
| Email |  |
| Landline |  |
| Cell number |  |

**Please identify areas of expertise your company has that can help and assist regional exporters**

|  |
| --- |
|  |

**Service information**

|  |  |
| --- | --- |
| Briefly describe the types of companies you serve |  |
| Please highlight any special export support needs you currently have. |  |

**INTEREST IN SPONSORING CNYIBA EVENTS**

Would your company be interested in sponsoring a CNYIBA event or program?

|  |  |
| --- | --- |
| YES |  |
| NO |  |

**CNYIBA ALLIANCE SERVICES PARTNER MEMBERSHIP**

* Annual membership dues are $1,000 per company
* Annual membership dues are $500 per company that is a member of the following regional organizations
	+ CenterState CEO
	+ MACNY
	+ Mohawk Valley EDGE
	+ Greater Oswego-Fulton Chamber of Commerce
	+ Cayuga Economic Development Agency
* Annual Membership dues for companies with 15 employees or less is an annual due of $250

**My company is interested in enhancing its membership to a CNYIBA Sponsor Member**

* Annual membership dues are $2,000 per company
* Annual membership dues are $1,000 per company that is a member of the following regional organizations
	+ CenterState CEO
	+ MACNY
	+ Mohawk Valley EDGE
	+ Greater Oswego-Fulton Chamber of Commerce
	+ Cayuga Economic Development Agency

***\*When submitting this application, please forward to*** ***info@cnyiba.net******. Please acknowledge that CNYIBA will consider this application once submitted. If CNYIBA invites your company to join the alliance, CNYIBA will send an invoice to your company.***

**Form submitted by : Name Signature Date .**