

CSBA Business Affiliate Membership Application

Please type or print clearly

<i>Application date</i>		<i>Organization name</i>	
<i>Address</i>	<i>City</i>	<i>State</i>	<i>Zip+4</i>
<i>Primary contact name</i>		<i>Title</i>	
<i>Telephone</i>	<i>Fax</i>	<i>Primary contact email</i>	
<i>Company website</i>		<i>Email address to appear in web listing</i>	

A CSBA Business Affiliate will have the opportunity to:

- » Network directly and build relationships with school leaders across the state
- » Receive discounted or free advertising, event registration and exhibit space
- » Get the latest in education news with subscriptions to CSBA's quarterly magazine, monthly newsletter and other publications
- » Demonstrate your support for California's K-12 public education system
- » Enjoy other benefits specified in CSBA Business Affiliate brochure

By signing this agreement, Affiliate understands and agrees that:

1. Affiliate's membership is subject to CSBA approval, will begin on the date of CSBA's approval, and will automatically renew each year on the anniversary of the date of initial approval until the membership is cancelled by Affiliate or by CSBA.
2. Affiliate may cancel its membership by written notice to CSBA at least 60 days before its membership anniversary date.
3. Membership fees are calculated on an annual basis, are payable upon receipt of CSBA invoice, and are

not refundable.

4. Discounts on Annual Education Conference and Trade Show (AEC) space are not applied until program fees are received in full, and that Trade Show discounts are based upon the price of a premium space and only one discount per enrollment is allowed.
5. Endorsement of Affiliate's products and services is not implied or intended.
6. Affiliate may use CSBA's Business Affiliate logo subject to CSBA's prior written approval and Affiliate's compliance with the "Business Affiliate Logo Guidelines."
7. Affiliate may not use CSBA's name, logo, image, or other proprietary information.
8. Affiliate is responsible for presenting any information requested in this Agreement, including Affiliate's company description and names, titles, and contact information of its designees, and any information needed to enable CSBA provide applicable Business Affiliate benefits to Affiliate.
9. Upon enrollment, it is Affiliate's responsibility to schedule run dates for free advertisements. It is also understood that requests for specific dates cannot be guaranteed and are limited per space availability.
10. CSBA reserves the right to modify and/or substitute Business Affiliate benefits with comparable benefits and that publications may vary based on CSBA's business need.

Twenty percent (20%) of your Business Affiliate membership will automatically be donated to the California School Boards Foundation (CSBF) (Federal Tax ID: 94-1623582). Contributions or gifts to CSBA Foundation are not tax deductible as charitable contributions. However, they may be tax deductible under other provisions of the Internal Revenue Code. If you do not wish to make this voluntary contribution **please check this box** and your entire investment will be applied to association operations. Your investment level will not change.

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Please designate one individual (on page one of this application) as the primary contact for your organization. The primary contact will receive mailed and written communications from CSBA including the monthly newsletter and quarterly magazine. One additional individual can be added for no additional charge. Up to three additional individuals may be added for an additional \$100 per year, and also receive CSBA mailed and written communications. Discounts on trade show exhibit space and advertising apply only to the company. A maximum of two individuals listed per company will be eligible for the Professional Business Affiliate Annual Education Conference and Trade Show registration discount.

Second individual: *Included*

_____	_____
<i>Name</i>	<i>Title</i>
_____	_____
<i>Phone</i>	<i>Email</i>

Third individual: *Add \$100 to yearly dues*

_____	_____
<i>Name</i>	<i>Title</i>
_____	_____
<i>Phone</i>	<i>Email</i>

Fourth individual: *Add \$100 to yearly dues*

_____	_____
<i>Name</i>	<i>Title</i>
_____	_____
<i>Phone</i>	<i>Email</i>

Fifth individual: *Add \$100 to yearly dues*

_____	_____
<i>Name</i>	<i>Title</i>
_____	_____
<i>Phone</i>	<i>Email</i>

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Company description:

Please provide a brief description of your company/organization and select up to three (3) categories under which you would prefer to be listed in the Business Affiliate directory.

- | | |
|---|---|
| <input type="checkbox"/> Architecture and Facilities Design | <input type="checkbox"/> Health and Wellness Education Programs and Materials |
| <input type="checkbox"/> Associations, Educational and Public Service Organizations | <input type="checkbox"/> Heating, Ventilating, Air Conditioning and Energy Systems |
| <input type="checkbox"/> Athletic/Playground/Maintenance Equipment | <input type="checkbox"/> Higher Education and Degree Programs |
| <input type="checkbox"/> Auditorium and Stadium Seating | <input type="checkbox"/> K-12 Assessment |
| <input type="checkbox"/> Board Member Training Programs and Materials | <input type="checkbox"/> Legal Services |
| <input type="checkbox"/> Bond Planning | <input type="checkbox"/> Mobile, Relocatable and Modular Buildings and Classrooms |
| <input type="checkbox"/> Books, Magazines and Periodicals | <input type="checkbox"/> Music Education Programs |
| <input type="checkbox"/> Career and College Prep Programs and Materials | <input type="checkbox"/> Office and Facilities Supplies |
| <input type="checkbox"/> Communications Systems | <input type="checkbox"/> Safety/Security Equipment and Systems |
| <input type="checkbox"/> Community Outreach | <input type="checkbox"/> Scaffolds, Lifts, Ladders and Materials Handling Equipment |
| <input type="checkbox"/> Computer-Assisted Training and Instruction | <input type="checkbox"/> School Management and Education Reform |
| <input type="checkbox"/> Computer Equipment (Hardware and Software) | <input type="checkbox"/> School Uniforms |
| <input type="checkbox"/> Consulting Services | <input type="checkbox"/> Special Education Programs, Materials and Products |
| <input type="checkbox"/> Curricular Materials, Textbooks, Education Services, Resources | <input type="checkbox"/> Staff Recruiting and Development Programs |
| <input type="checkbox"/> Document Management and Duplication | <input type="checkbox"/> Technology |
| <input type="checkbox"/> Extra-Curricular Activities | <input type="checkbox"/> Tests, Testing and Evaluation Systems and Accreditation |
| <input type="checkbox"/> Facility Construction and Maintenance | <input type="checkbox"/> Translation Services |
| <input type="checkbox"/> Financial Consulting/Underwriting | <input type="checkbox"/> Transportation Products and Services |
| <input type="checkbox"/> Financial Services, Insurance and Employee Benefits | <input type="checkbox"/> Travel Programs |
| <input type="checkbox"/> Floor Coverings | <input type="checkbox"/> Wall Systems and Wall Coverings |
| <input type="checkbox"/> Food and Food Service Management | <input type="checkbox"/> Wireless Local Area Network |
| <input type="checkbox"/> Fundraising | <input type="checkbox"/> Other Products and Services |
| <input type="checkbox"/> Furnishings for Classroom, Cafeteria, Lounge, Office and Library | |
| <input type="checkbox"/> Green Technology/Initiatives | |



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Business Affiliate Membership Levels

Choose One:

Associate level 1-12 employees: \$650 Associate level 13+ employees: \$1,000 Professional level: \$5,000

Principal Level: \$12,500 Premier level: \$25,000 Industry Leader: \$40,000

Additional Individuals (maximum 3) x \$100 = TOTAL INVESTMENT:

_____ _____ _____

Authorization

I hereby authorize CSBA to invoice our company for the total investment amount and activate membership upon application approval.

Total investment: \$ _____

I (we) wish to affiliate with other California education industry leaders and become a CSBA Business Affiliate. Non-refundable membership fees cover a 12 month period from the first day of the month closest to the date payment is received. I understand that membership start dates are on a quarterly basis. If my start date is before or after the next quarterly billing cycle you, I will pay a prorated amount. Principal and Premier levels can be invoiced to pay once or invoiced to pay quarterly. We also agree to provide a minimum of 60 days written notice prior to our renewal date should we elect to terminate affiliate status. By becoming an affiliate I (we) authorize CSBA to send information on products and services by phone, fax or email. I (we) certify that the foregoing information is correct and authorize CSBA to process my (our) chosen method of payment and activate participation upon application approval. I (we) understand CSBA Business Affiliate program participation is non-transferable and non-refundable. CSBA will not disclose any business or personal information to any third party without your consent.

Business Affiliate program revenues are used by the California School Boards Association and California School Boards Foundation to provide training opportunities and services for school governance leaders who work on behalf of California's schoolchildren.

Please type or print clearly

Application date Organization name

Address City State Zip+4

Authorized Signature Date

Please fax or email completed form to:

California School Boards Association
 Attention: **Business Affiliates**
 fax: (916) 669-3366 | email: businessaffiliates@csba.org