

DESIGNATION AFFINITY PROGRAM APPLICATION / INVOICE

This is an application/invoice for membership in IBABC's *Designation Affinity Program*. The membership fee is **\$75.00** (GST included) per year, invoiced annually.

You must have a *Designation Affinity Program* membership to continue using your CAIB, CPIB or other IBABC-issued designation in print media.

If you're now working for an IBABC-member brokerage, or if you no longer wish to use the designation(s) and don't want to be a *Designation Affinity Program* member, please advise us in writing and we'll cancel this invoice.

Otherwise, if you're applying for or renewing a *Designation Affinity Program* membership, please complete the lower portion of this application/invoice and email to <u>scoles@ibabc.org</u>. You will then be sent the link for payment.

Once paid you may then continue using your designation(s).

And please let us know if your mailing address changes at any time. Thank you!

	of

Street Address: _____

Email Address:

Agree to pay \$75 for my annual membership to the Designation Affinity Program

starting on _____(DD/MM/YYY).

I realize that this membership allows me to use the IBABC designation(s) that I'm eligible for but does not include any other IBABC membership privileges. I also realize that, should I become employed by an IBABC-member brokerage during the coming year, there will be no refund for the *Designation Affinity Program* membership fee I have paid.