

# Application for Local IBA Affiliation



## American Independent Business Alliance

222 South Black Ave.  
Bozeman, MT 59715  
(406) 582-1255  
info@AMIBA.net  
www.AMIBA.net

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Local Alliance Name

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Primary Contact Name

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Title

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Address

---

City

State

Zip

---

Phone

Alternate Phone (indicate location)

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Fax

email

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website

Please indicate appropriate affiliation category:

### ***Independent Business Alliance/Organizational Affiliates:***

First year:

- Enrollment: \$950  
*(a one-time fee that includes first year affiliation, start-up materials and templates, licensing and development) Installment plan available*

We're an existing organization or don't need start-up materials and templates;  
our budget is:

- Under \$20,000                      \$ 200
- \$20,000-\$40,000                  \$ 400
- \$40,000-\$80,000                  \$ 500
- over \$80,000                        \$ 600

Please forward your completed application and a check payable to AMIBA.

Your Community  
Thanks You!

## ***Welcome!***