

# Yes! We want to be an ICBA Member—\$5,500 (July-June)

How did you hear about ICBA?

## **Company Description**

Describe your company's offerings—up to 100 words—to be used for approval and published in ICBA directories. ICBA reserves the right to edit descriptions. Please be as descriptive as possible so our banks can find you.

# **Membership Contact**

To receive all information regarding membership including renewal notices, publications, exhibiting information and special offers.

Name			
Title			
Company Name			
Address			
City		State	Zip
Phone	Fax		
Email			
Published Contact			

# Name Title Address City State Zip Phone Fax Email Website Company Social Media

To be published in all ICBA print and virtual directories.

List your parent company and any subsidiaries of your organization:

# List all current banking association affiliations/ memberships:

Are you owned or affiliated with a credit union or CUSO? Yes No

What percentage of your customers are credit unions?

### References

For our records, list two community banks that your business has served. Required for approval. If unable to provide, please include a customer reference.

Contact Name		
Bank Name		
City		State
Phone	Email	
Contact Name		
Bank Name		
City		State
Phone	Email	
Additional Subsc	ription(s) to Independ	dent Banker®:
Name		
Title		
Company Name		
Name		
Title		

Company Name

# **CICBA**

Please take advantage of our electronic payment option for your company's ICBA corporate membership renewal dues.

You will be notified of the dues dollar amount by mail in early May each year. Each June 5, we will automatically deduct the dues amount (via preauthorized ACH debit) from the bank account you specify here. The delay allows sufficient time for you to contact our Vendor Relations Department with any billing concerns before your account is debited.

To begin this convenient free service, simply fill in the required information, have an authorized signer of the account sign the agreement, and return to ICBA by fax 800-824-7859 or by mail in the enclosed envelope.

# **ACH Debit Authorization**

This agreement authorizes your bank to accept debits for ICBA corporate membership dues.

MEMBER CORPORATE agrees to the following method for collection of fees for ICBA corporate annual membership dues. Such debit will be initiated by ICBA on the 5th of June prior to the year of membership renewal (or the next banking day if the 5th is a non-banking day).

With regard to charges for ICBA corporate membership, MEMBER CORPORATE understands that the funds representing the total amount due for ICBA corporate membership renewal will be on deposit in MEMBER CORPORATE's bank account in collectible form and in sufficient amount on the day the ICBA ACH debit is initiated. ICBA's PROCESSING BANK is authorized to debit MEMBER CORPORATE's bank account via ACH in accordance with the provisions in above paragraph.

MEMBER CORPORATE agrees that ICBA's PROCESSING BANK's rights in reliance on this authorization shall be the same as if the entry were initiated personally by the MEMBER CORPORATE, and that if any charge is dishonored, whether with or without cause, ICBA's PROCESSING BANK shall have no liability based thereon.

In the event of any conflict between terms and conditions of this agreement and conditions of any other ICBA Agreement, this agreement shall control and govern.

This authorization shall remain in effect until revoked by MEMBER CORPORATE in writing to ICBA, at least 15 days in advance.

Both MEMBER CORPORATE and ICBA agree to comply with all applicable laws and NACHA rules.

Corporate Information					
Corporate Compar	ny Name				
Corporate Address	3				
City		State	Zip		
Account Type Checking	Covingo	Conorol Lodger			
Checking	Savings	General Ledger			
Routing Number					
Account Number					
Authorized Sign	ature(s)				
Authorized Signatu	ire				
Printed Name					
Title					
Email					
Date	IC	BA Member Number			
Authorized Signatu	Ire				
Printed Name					
Title					
Email					
Date	IC	BA Member Number			