



Boating Industries Association of Upstate New York
www.cnybia.com

Membership Application

Name of Business/DBA _____

Street Address _____

Mailing address _____

Phone _____ Fax _____ Website _____

Contact Name _____ Email: _____

Principals/Owners _____

Are you on the water _____ Which body of water _____ Do you have a ship store _____

What lines of boats, motors, and trailers do you sell _____

What Services do you offer _____

What is your "Official Business Certificate" number, issued by DMV _____

What is your "Certificate of Authority" number _____

Years in business _____

Please include copy with application

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Members of the Association that you have done business with, or you know:

I hereby make application for membership in the Boating Industries Association of Upstate NY and agree to abide by the bylaws. I understand that Membership automatically includes membership in the Empire State Marine Trades Association and my dues are paid through my local association. Once accepted as a Member I shall be entitled to all membership privileges of the association according to the bylaws.

Signed: _____

Membership Fees: \$375 (Fee includes membership to the ESMTA) Please send Check along with copies of your Official Business Certificate and your Certificate of Authority.

PO Box 1387, Cicero, NY, 13039

315-447-9286