

Community Partners Program

Membership Application Form

Please email your completed form to members@cua.com to be added to the Community Partners Program. You will be sent a welcome package after you are added to the online directory.

| Date: | CUA Staff Name (if applicable): | | | | |
|---|---|-----------------|-----|-------------------|--|
| CUA Member # (if applicable): | A Member # (if applicable): CUA branch: | | | | |
| Is the business a commerical banking member of CUA? (please check): | | | Yes | No | |
| Is the owner a personal banking member of CUA? (please check): | | | Yes | No | |
| Business name: | | | | | |
| Provide a brief description of your be | usiness: | | | | |
| Business Owner: Business contact: | | | | | |
| Email address: | | Business phone: | | | |
| Social media accounts: | Website: | | | | |
| | | | | | |
| Business address(es): | | | | | |
| Business Logo: Will er | mail logo | On my website | | lo logo available | |
| Offer/discount description: | | | | | |

I acknowledge that CUA will promote my business through various channels, that I will display a tent card and window decal in my shop and I will receive the Community Partner Program's quarterly e-newsletter, featuring news from CUA, opportunities and resources and more.

Thank you! We will be in touch soon to confirm your membership.

