



OHIO BURSARS ASSOCIATION
Business Partner Membership Application

P.O. Box 82536
Columbus, Ohio 43202
www.ohiobursars.org
obaboardmembers@gmail.com

Section I: General Information

The Board of Trustees welcomes applications from organizations that have an ongoing relationship with Bursars, Business Officers, Collections Managers, and Accounts Receivable and Cashiering Supervisors from two-year and four-year public and private colleges in the State of Ohio.

Membership is governed by the following guidelines:

1. The associate member is a non-voting member.
2. The associate member will receive the 'Between Bursars' email newsletter.
3. The associate member may attend regular meetings.
4. The associate member will be provided with mailing list for the following purposes:
 - a. To provide communication
 - b. To provide access
 - c. The mailing list is to be used for internal purposes only and not to be shared or sold or otherwise distributed. (The Board of Trustees reserves the right to deny or grant access to the mailing list.)

Section II: Annual Membership Dues

The annual dues for Business Partners are \$1,000 and include the following benefits:

- ✓ Membership for one year (July 1 – June 30)
- ✓ Access to the OBA listserv
- ✓ Attendance at the fall and winter (regional) meetings
- ✓ Ability to send up to 2 representatives to the Spring Conference (Each attendee over 2 must pay the conference fee)
- ✓ Use of a display table in the exhibition hall at the Spring Conference
- ✓ Company logo and contact information displayed on the OBA website

To apply for membership, please complete all remaining sections of this application.

Section III: Company/Organization Contact Information

Name of Company/Organization: _____

Address: _____ City: _____ State: _____

Phone: _____ Email: _____

Organization Web Address: _____



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Section IV: Company/Organization Representative

Primary Representative:

Name: _____ Title: _____

Phone: _____ Email: _____

Alternate Representative:

Name: _____ Title: _____

Phone: _____ Email: _____

Section V: Company/Organization Information

What is the primary product or service you or your company provides?

Why are you interested in becoming an Associate Member?

How can the OBA benefit from you or your company?

Do you have any topics that you or your company could present to the OBA?

How did you find out about the OBA?

If your company is not currently doing business with an Ohio School, please provide the institution recommending your organization: _____

Other institutions that use your service:

	Institution	Reference Name	Title
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

Is your company a member of other similar business officer organizations? If yes, please list below:



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Section VI: Application Submission

Business Partner Membership applications may be submitted electronically or by mail.

Option 1: Electronic Submission

Please email the completed application, subject line "OBA Membership" to obaboardmembers@gmail.com. Please remit dues payment online through the Ohio Bursars Association homepage, www.ohiobursars.org. Online payments are credit card only.

Option 2: Submission By Mail

Please mail the completed application, along with a check made payable to Ohio Bursars Association, to the following:

Ohio Bursars Association
Attn: Membership
P.O. Box 82536
Columbus, OH 43202

Your application will be reviewed and voted for approval by the Board. Thank you for your interest in the Ohio Bursars Association!