



# Annual Membership

Agreement/Invoice

NAME: \_\_\_\_\_ PHONE: (     ) \_\_\_\_\_ - \_\_\_\_\_

COMPANY: \_\_\_\_\_ FAX: (     ) \_\_\_\_\_ - \_\_\_\_\_

ADDRESS: \_\_\_\_\_ EMAIL: \_\_\_\_\_

CITY/ST/ZIP: \_\_\_\_\_ CATEGORY: \_\_\_\_\_

**Membership Commencement Date:** \_\_\_\_\_ **Membership Term:** \_\_\_\_\_

**Membership Renewal Date:** \_\_\_\_\_

**Payment Choice:**

- Single Payment** - one annual payment of \$900.00
- Four equal quarterly installments** - \$250.00 each (credit card only)

**Method of Payment:**

- Check (send to: ImageWorks, LLC, PO Box 3184, Vernon, CT 06066)
- Visa             MasterCard             American Express

For credit card payments: I authorize CBN to keep my signature on file and to charge my credit card as selected.  
 I understand and agree that CBN memberships are annual in term irrespective of payment schedule.

Number: \_\_\_\_\_ Expires: \_\_\_\_\_

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Billing Address: \_\_\_\_\_ City/ST/Zip: \_\_\_\_\_

Please make checks payable to ImageWorks, LLC and remit to: PO Box 3184, Vernon, CT 06066  
 If you have any questions concerning this invoice, please call: **Jeffrey Cohen at 860-872-3270**

**Thank You For Your Business!**