

Dear fellow charter industry professional:

CYBA International (CYBA), established in 1982 and dedicated to the elevation of the yacht charter industry to the highest degree of professionalism and ethics, offers numerous advantages to its members including advertising, website inquiries, and trip cancellation insurance. An abundance of other benefits are available as well.

Use of the CYBA Trust Account at US Bank for the protection of your client's deposit funds is available to all brokers, regardless of CYBA Membership.

To become an Active Member of CYBA with full voting rights, permission to display the CYBA logo in advertising and to enjoy many other privileges available through your membership, a broker must have a minimum of two years in business, have attended at least two recognized yacht charter shows in the last calendar year, have the sponsorship of at least two active CYBA members and be endorsed by three Clearing House and/or Management firms. Proof of other procedures related to accepted business practices is required. Annual dues for Active Membership are \$125 + a one time application charge of \$30.

If you do not qualify under these conditions for full active membership, you are invited to join our mentor program as an Associate Member. An experienced CYBA member will be assigned to assist you until you qualify for full membership. Annual dues for Associate Membership are \$125 + a one time application charge of \$30.

If you are not a yacht charter broker, but are with a firm or a service working within the industry that is related to the yacht charter industry, such as a publication, management firms, marine insurance agent, etc., you could be eligible to become an Affiliate Member. Annual dues for affiliate membership are \$125 + a one time application charge of \$30.

The enclosed Membership Application outlines our goals and qualification requirements for various types of membership. To access the roster of the CYBA members to enable you in contacting brokers you wish to sponsor you, please go to our website at [www.cyba.net](http://www.cyba.net).

Please complete and forward the form to the address shown below. The completed form must be accompanied by your check with proof of advertising and any other documentation required to do business in your state. Should membership be denied the annual membership dues would be refunded and all other materials will be returned to you; the application fee, however, is non-refundable. We look forward to having you join the growing organization of CYBA Professional Yacht Charter Agents.

**MEMBERSHIP APPLICATION**  
**CHARTER YACHT BROKERS ASSOCIATION, INC.**

THE MISSION OF THE **CHARTER YACHT BROKERS ASSOCIATION, INC.** IS TO PROMOTE AND MAINTAIN A HIGH DEGREE OF PROFESSIONALISM WITHIN THE YACHT CHARTER INDUSTRY. THE ASSOCIATION IS COMMITTED TO A STRICT CODE OF ETHICS, TO PROVIDING FIDUCIARY RESPONSIBILITY, TO SPONSORING EDUCATIONAL PROGRAMS THAT INCREASE MEMBERS INDUSTRY KNOWLEDGE AND AWARENESS, AND TO ACT AS LIASON BETWEEN THE MEMBERS AND INDUSTRY RELATED GROUPS.

MEMBERSHIP PROCESS

1. Active members: Prior to submitting an application, the candidate must have a minimum of two years in business and have attended a minimum to two recognized charter broker shows in the last calendar year. The candidate is also required to obtain sponsorship letters from two (2) active CYBA members and be endorsed by three (3) Clearing House and/or Management Firms
2. Associate members: Prior to submitting an application, the candidate must have attended at least one (1) recognized charter broker show. The candidate is also required to enter the Mentor program and to agree to adhere to the by-laws and code of ethics of the Association.
3. Affiliate members: Prior to submitting an application, the candidate must make known his relationship to the charter yacht broker industry.

After review and acceptance of the candidate's application by membership committee and ratification by the board of directors, the candidate will be granted active, associate or affiliate membership.

MENTOR PROGRAM

During the period in which a broker is unable to qualify for active membership, s/he will be placed on the mailing list and assigned a mentor. The mentor will be available to the broker for advice and any and all matters pertaining to ethics and industry procedures.

TYPE OF MEMBERSHIP APPLIED FOR: Active \_\_\_\_\_ Associate \_\_\_\_\_ Affiliate \_\_\_\_\_

Candidates Name: \_\_\_\_\_

Name of Firm: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Local Phone: \_\_\_\_\_ Toll Free Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_ Web Site: \_\_\_\_\_

If a broker, list all the brokers in your firm who have been active brokers for at least one year and indicate the principle of the primary broker: \_\_\_\_\_

Type of Business: Sole Proprietor \_\_\_\_\_ Partnership \_\_\_\_\_ Corporation \_\_\_\_\_

Name of Primary Bank: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Account No: \_\_\_\_\_

Please answer the following questions in as much detail as possible. Attach separate sheet(s) if needed:

1. How long have you been a charter yacht broker? \_\_\_\_\_ (years)
2. Do you act as a management firm for one or more yachts? Yes \_\_\_\_\_ No \_\_\_\_\_
3. Do you act as a travel agent? Yes \_\_\_\_\_ No \_\_\_\_\_
4. Are you involved in the sale of yachts? Yes \_\_\_\_\_ No \_\_\_\_\_
5. Please list any membership you have (FYBA, MYBA, AYCA, YABA, MIAASF, etc.) that are directly related to the marine industry:  
\_\_\_\_\_  
\_\_\_\_\_
6. Supply documentation (proof) of advertising that shows the primary function of your business in booking yacht charter (attach to, or enclose with application form).
7. List any other media (publications, etc.) you use to actively promote yacht charters:  
\_\_\_\_\_  
\_\_\_\_\_
8. Supply a copy of your local business license, if required. Required: Yes \_\_\_\_\_ No \_\_\_\_\_
9. Are you bonded? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, what is the maximum limit \$ \_\_\_\_\_  
If required, are you willing to obtain a bond? Yes \_\_\_\_\_ No \_\_\_\_\_
10. Is your business phone answered during regular business hours by:  
Yourself \_\_\_\_\_ Answering Machine \_\_\_\_\_ Answering Service \_\_\_\_\_ An Employee \_\_\_\_\_
11. Do you have other employees? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, please provide:
  - a. Number of part-time employees \_\_\_\_\_
  - b. Number of full-time employees \_\_\_\_\_
12. List the Charter Boat Shows (dates and locations) that you have recently attended:  
\_\_\_\_\_  
\_\_\_\_\_
13. Active Member Applicants only: List at least three clearing houses and/or management firms that you routinely use to book charters:  
\_\_\_\_\_

14. Active Member Applicants only: List two sponsors (active members of CYBA) that will be providing letters in support of your application.

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15. Have you used the Trust Account that CYBA established with the U. S. Bank?  
Yes \_\_\_ No \_\_\_

16. Please provide information on previous involvement with the yachting industry and how it will help you succeed as a charter yacht broker (attach a separate sheet with details).

17. Please attach a letter of introduction on your company letterhead (include any business or educational experience outside of the yachting industry). It will be circulated to all members of the Membership Committee along with your application. Your application, letter and any additional information provided will be reviewed by the Board of Directors for final approval.

I AGREE TO READ, UNDERSTAND AND ABIDE BY THE CYBA BY-LAWS AND CODE OF ETHICS AND HEREBY GIVE MY PERMISSION TO THE OFFICERS OF THE CHARTER YACHT BROKERS ASSOCIATION, OR THEIR DULY APPOINTED AGENTS, TO VERIFY THE CORRECTNESS OF THE INFORMATION CONTAINED HEREIN. I FURTHER UNDERSTAND THAT COMPLETION OF THIS APPLICATION IS NOT A GUARANTEE OF ACCEPTANCE. IF ACCEPTED, HOWEVER, I FURTHER AGREE TO SERVE ON COMMITTEES WHEN SO REQUESTED BY THE BOARD OF DIRECTORS, AND TO USE THE CYBA TRUST ACCOUNT, FOR THE DEPOSIT OF CHARTER FEES, WHENEVER POSSIBLE.

Signature: \_\_\_\_\_ Title: \_\_\_\_\_

Date: \_\_\_\_\_ Application Fee: \$ 30.00 \_\_\_\_\_

Annual Dues: \$125.00 \_\_\_\_\_

Total Enclosed: \$ \_\_\_\_\_

Please include your check made payable to CYBA for the correct amount in U.S. dollars. Please submit check, application, and required documentation to:

Wayne Adao  
9706 Whispering Willow Ct.  
Brentwood, TN 37027  
615-776-7924

NAME OF MENTOR ASSIGNED TO APPLICANT \_\_\_\_\_