



Kansas Auctioneers Association, Inc. Membership Application

11345 W. Carr Ct. • Wichita, KS 67209 • (316) 208-6151 • www.kansasauctioneers.com

PERSONAL INFORMATION

Name: _____ Spouse: _____
Address: _____
City: _____ State: _____ Zip: _____
Home Phone: _____ Cell Phone: _____
Email address: _____

AUCTION INFORMATION

Company Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Business Phone: _____ Fax Number: _____
Website: _____ Position You Hold: _____
Names of Partners: _____
How long have you been an auctioneer? _____ Designation You Hold: _____
Do you specialize in a particular field? Yes ___ No ___ If Yes, which one: _____
List other segments of auctioning in which you hold auctions:
1) _____ 2) _____
3) _____
Are you a member of another State Association: Y ___ N ___
If yes, which ones: _____
Offices held: _____

I hereby make application for membership in the Kansas Auctioneers Association, Inc. If accepted, I will abide by its By-Laws, support its objectives, comply with the Code of Ethics of the Kansas Auctioneers Association, Inc. and pay the established dues. I understand if I do not comply with the Code of Ethics and the By-Laws my membership may be revoked. It is also understood that if for any reason membership by the said Association is not approved upon consideration of this Application then membership will not be granted nor accepted on this Application and the total fee will be returned to me immediately.

Membership is January through December

First Year Member	\$ 62.50 _____
General Member	\$125.00 _____
Associate/Affiliate/Retired Member	\$ 62.50 _____

Your Signature: _____ Date: _____

Submit application and appropriate dues payment to:

KAA - 11345 W. Carr Ct. - Wichita, KS 67209 or cindi@kansasauctioneers.com