



Kansas Auctioneers Association, Inc. Membership Application

PERSONAL INFORMATION

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

AUCTION INFORMATION

Auction House Contract Auctioneer Internet Auctions

Company Name: _____ Address: _____
 Phone: _____ City: _____
 Email: _____ State: _____ Zip: _____
 Website: _____ How long have you been an Auctioneer? _____

Are you an NAA Member? Yes No Designations you hold: _____
 Do you belong to another auction association? Yes No If yes, which ones: _____
 Has your membership to any association ever been revoked or denied? Yes No

- | | | | |
|--|---|--------------------------------------|---|
| <input type="checkbox"/> Personal Property | <input type="checkbox"/> Antiques | <input type="checkbox"/> Coins | <input type="checkbox"/> Collectibles |
| <input type="checkbox"/> Real Estate | <input type="checkbox"/> Agriculture/Land | <input type="checkbox"/> Firearms | <input type="checkbox"/> Business Liquidation |
| <input type="checkbox"/> Livestock | <input type="checkbox"/> Farm Equipment | <input type="checkbox"/> Automobiles | <input type="checkbox"/> Charity/Fundraisers |
| <input type="checkbox"/> Other: _____ | | | |

Membership is from January 1 to December 31

New Members & joining in:	Existing & Members rejoining:
Jan/Feb/Mar \$125.00 ____	General Member \$125.00 ____
Apr/May/June \$100.00 ____	Retired Member \$ 62.50 ____
July/Aug/Sep \$ 75.00 ____	Affiliate Member \$ 62.50 ____
Oct/Nov/Dec \$125.00 ____	

(New Members who join after October 1 will receive membership for the remainder of the current year and the entire following year.)

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

Your Signature: _____ Date: _____

Submit application and appropriate dues payment to:
KAA - 11345 W. Carr Ct. - Wichita, KS 67209 or cindi@kansasauctioneers.com