



Kansas Auctioneers Association 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: _____

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Has your membership to any association ever been revoked or denied?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

Which areas do you specialize in?

- | | | | |
|--|---|--------------------------------------|---|
| <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: _____ | | | |

Website: _____ Facebook Page: _____
 Twitter: _____ YouTube Channel: _____
 Instagram: _____ LinkedIn: _____
 Pinterest: _____ Flickr: _____

Membership is from January 1 to December 31

New Members & joining in:

Jan/Feb/Mar\$125.00 _____
 Apr/May/June\$100.00 _____
 July/Aug/Sep\$ 75.00 _____
 Oct/Nov/Dec.....\$125.00 _____

Existing & Members rejoining:

General Member.....\$125.00 _____
 Associate Member.....\$ 62.50 _____
 Retired Member.....\$ 62.50 _____
 Affiliate Member.....\$ 62.50 _____

(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