



NEBRASKA AUCTIONEERS ASSOCIATION

PO Box 150, Rising City, NE 68658-0150 | 402-367-9767 | info@nebraskaauctioneers.com | www.nebraskaauctioneers.com

The leading voice for the auction industry in Nebraska

Membership Application

Please check below the membership(s) you are purchasing for 5/1/2018 - 4/30/2019:

- 2018 - 2019 Company/Firm Members' Dues of the Nebraska Auctioneers Association \$400.00
 - 2018 - 2019 Auctioneer Member of the Nebraska Auctioneers Association \$100.00
 - 2018 - 2019 Auctioneer First Year in Business or New Graduate \$ 80.00
 - 2018 - 2019 Nebraska Auctioneers Auxiliary Dues \$ 30.00
 - 2018 - 2019 Nebraska Auctioneers Association Dues - Associate Member \$125.00
 - Voluntary Legislative Fund Donation in the Amount of \$ _____
- TOTAL ENCLOSED** (Please send payment with this application form) \$ _____

***PLEASE COMPLETE THE INFORMATION BELOW TO PROVIDE CONTACT INFORMATION FOR YOUR MEMBERSHIP**

Use the back side of this listing sheet for updating Auxiliary and Non-Auctioneer Employees

THE FOLLOWING INFORMATION SHOULD BE YOUR MOST UP-TO-DATE CONTACT INFO:

NAME & TITLE _____
 FIRM NAME _____
 MAILING ADDRESS (P.O. BOX) _____
 CITY _____ STATE _____ ZIP _____ COUNTY _____
 PHONE (____) _____ 800 NUMBER (____) _____ FAX NUMBER (____) _____
 CELLULAR PHONE (____) _____ WEB SITE _____
 E-MAIL ADDRESS _____

Please make check payable to Nebraska Auctioneers Association (NAA) or pay by credit card below

CREDIT CARD INFORMATION:

Type of Card: _____ (Visa, MC, American Express, Discover) Email (required for receipt): _____
 Card Number: _____ Expiration Date: _____
 Name on Card: _____ Signature on Card: _____

***5% administrative fee is added to all credit card transactions. Charges will appear under the name of "Trade Assn. Mgmt".*

TYPE OF AUCTIONS I SPECIALIZE IN: (CHECK ALL THAT APPLY REGARDLESS OF INFO WE NOW HAVE)

All Types **OR** SELECT BELOW:

- | | | |
|----------------------------------------------------------|---------------------------------------------------------|--------------------------------------------------|
| <input type="checkbox"/> Agri-business | <input type="checkbox"/> Commercial Heavy/Equip. | <input type="checkbox"/> Firearms |
| <input type="checkbox"/> Antiques/Collectibles | <input type="checkbox"/> Commercial Real Estate | <input type="checkbox"/> Household Goods |
| <input type="checkbox"/> Automobiles/Trucks | <input type="checkbox"/> Consignments | <input type="checkbox"/> Internet |
| <input type="checkbox"/> Aviation | <input type="checkbox"/> Construction Equipment | <input type="checkbox"/> Livestock |
| <input type="checkbox"/> Benefits/Charities/Fund Raisers | <input type="checkbox"/> Estates | <input type="checkbox"/> Personal Property |
| <input type="checkbox"/> Business Liquidations/Closeouts | <input type="checkbox"/> Farm/Ranch Equipment/Machinery | <input type="checkbox"/> Residential Real Estate |
| <input type="checkbox"/> Classic Auto/Trucks | <input type="checkbox"/> Farm/Ranch Liquidations | <input type="checkbox"/> Toys |
| <input type="checkbox"/> Coins/Stamps | <input type="checkbox"/> Farm/Ranch Real Estate | <input type="checkbox"/> Utility Sales |
| | | <input type="checkbox"/> Western Memorabilia |
| | | <input type="checkbox"/> Other _____ |

Auxiliary Membership/Home Information:

Spouse's Name _____
 Address _____
 City _____ State _____ Zip _____
 Phone Number (____) _____ Cellular Phone (____) _____ Fax Number (____) _____
 E-Mail Address _____

Company/Firm Membership: List the following non-auctioneer employees as part of my firm:

Please select where you would like information mailed to you!

1. Name _____
Company _____
Address: **Select one:** Home ___ Office ___ _____
City _____ State _____ Zip _____
Phone _____ Email Address _____

2. Name _____
Company _____
Address: **Select one:** Home ___ Office ___ _____
City _____ State _____ Zip _____
Phone _____ Email Address _____

3. Name _____
Company _____
Address: **Select one:** Home ___ Office ___ _____
City _____ State _____ Zip _____
Phone _____ Email Address _____

4. Name _____
Company _____
Address: **Select one:** Home ___ Office ___ _____
City _____ State _____ Zip _____
Phone _____ Email Address _____

5. Name _____
Company _____
Address: **Select one:** Home ___ Office ___ _____
City _____ State _____ Zip _____
Phone _____ Email Address _____

6. Name _____
Company _____
Address: **Select one:** Home ___ Office ___ _____
City _____ State _____ Zip _____
Phone _____ Email Address _____

USE ADDITIONAL SHEETS OF PAPER FOR ADDITIONAL NON-AUCTIONEER EMPLOYEES!

**RETURN TO:
NEBRASKA AUCTIONEERS ASSOCIATION
PO BOX 150
RISING CITY, NE 68658-0150
PHONE: (402) 367-9767
E-Mail: dduren@nebraskauctioneers.com
WEBSITE: www.nebraskauctioneers.com**