

Membership Application



Please check one of the following:

- Member** \$165 annually (Active Members. Any natural person who is a licensed auctioneer pursuant to the requirements of the Indiana Code and is in good standing with all state, federal, and local auctioneer licensing authorities OR; Any natural person who: is not a licensed auctioneer pursuant to the requirements of the Indiana code, engaged in the auction business, has an interest in the auction industry and is in agreement with the Governing Documents and the objective of the Association.
- Auxiliary** \$ 10 annually (spouse of auctioneer, support staff of auctioneer)

Please print or type:

| | | |
|----------------------|-------|------------------------------------|
| Name | | Indiana State Auctioneer License # |
| Preferred First Name | | Spouse's Name |
| Company Name | | |
| Company Address | | City, State, ZIP |
| County | Phone | FAX |
| Email | | Website Address |
| Home Address | | |
| City, State, ZIP | | |

Please send all correspondence to my company address.

Please send all correspondence to my home address.

Additional Information & Optional Fees

Auction School Attended _____

IAA Member who Recruited You _____

Signature _____ Date _____

IAA Field Representative _____

Is your spouse interested in becoming an Auxiliary Committee member? Members can enjoy speakers and other educational programs tailored specifically to the committee. The cost to be an auxiliary member is \$10/year.

Yes, my spouse will be an auxiliary member. I've added the \$10 charge to the total due below.

INDIANA AUCTIONEERS FOUNDATION DONATION
The Indiana Auctioneers Foundation is the fundraising partner of the IAA. Funds promote the auction profession and industry. Donations are tax deductible.

Yes, I will make a \$25 donation and will add the charge to the total due below.

Payment Information - add up amounts from above and indicate total here \$ _____

Payment Type (Please Circle) CHECK VISA MASTERCARD DISCOVER AM EXPRESS

Card Number _____ Expiration Date and CVV # _____

Signature _____

**Return completed application with payment to: IAA - 48 N. Emerson Ave, Ste. 300 - Greenwood, IN 46143
email at director@indianauctioneers.org**

Questions: Contact your field representative directly.