

# National Association of Ticket Brokers (NATB)

## Individual Membership Application

Please be advised that this is an application only and is subject to the NATB review process. Your eligibility to join the NATB will be based, in part, on the accuracy of the information supplied herein.

### INFORMATION

**Applicants Name:** \_\_\_\_\_

Please describe how you are involved in the ticket industry:

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Name of Company You Work For: \_\_\_\_\_

Is the Company an NATB Member? Yes \_\_\_\_\_ No \_\_\_\_\_

Business Address:

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Years at this Company: \_\_\_\_\_

Email: \_\_\_\_\_ Alternative Email: \_\_\_\_\_

Website: \_\_\_\_\_

Telephone #: \_\_\_\_\_

Fax #: \_\_\_\_\_

List any professional affiliations: \_\_\_\_\_

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Why do you want to join the NATB? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How would you like to participate in NATB's Women's Initiative and Leadership Council (a/k/a "Women in NATB" or "WIN")?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please tell us how you heard about the NATB or WIN: \_\_\_\_\_  
\_\_\_\_\_

**Upon acceptance as an Individual Member of NATB, I understand that my right to benefits is limited by the NATB Bylaws to participation in WIN and to elect one seat on NATB's Board of Directors. I also agree to be bound by and adhere to the NATB's Code of Ethics, NATB Bylaws, WIN's Bylaws, NATB's Consumer Complaint Procedures, Resolutions, Regulations, Rules and Requirements.**

X \_\_\_\_\_ (Signature)

***Payment must accompany application to be processed***  
**NATB Individual Membership-- \$100.00 annually**

Amount Received: \$ \_\_\_\_\_

Check # (Made Payable to NATB): \_\_\_\_\_

AmEx/MasterCard/VISA #: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ CVV2 #: \_\_\_\_\_

Name on Card: \_\_\_\_\_

\*\*\*\*\*OFFICIAL USE ONLY\*\*\*\*\*

Individual Member's Name: \_\_\_\_\_

Application verified by: \_\_\_\_\_

Date Received: \_\_\_\_\_ Date Approved: \_\_\_\_\_