

National Association of Ticket Brokers (NATB)

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. Notice of the application will be provided to NATB Members for comment. You are not a Member until notified in writing and may not use the NATB logo or Membership privileges until that time.

COMPANY INFORMATION

Complete legal name of business and names you are doing business under:

Number of years in business under this name: _____

Business address: _____

Email: _____

Alternative Email: _____

Website: _____

Telephone #: _____

All principals' names: _____

Principals' cell phone numbers: _____

List any other ticket brokering companies in which the principals were involved: _____

BUSINESS PRACTICES

Describe company and principal(s)' experience in the ticket brokering industry:

Provide one current NATB Member that you do business with who is willing to sponsor you. If you cannot provide an NATB company, you can qualify by being in good standing with two marketplaces or exchanges that you do business with.

NATB Company: _____

Contact Name: _____

Exchanges or marketplaces your company does business with:

1. _____

2. _____

Any past or pending disputes with any broker? _____

Any pending disputes with any customer? _____

Are you in compliance with all state laws? _____

Additional comments if any: _____

I affirm under the penalties of perjury that the foregoing information is true and correct. By submitting and executing this application I authorize NATB to contact any marketplace or exchange I have identified and inquire about me and my company and our history and status with each marketplace or exchange. Upon acceptance into membership in the NATB, I / We agree to be bound by and adhere to the NATB's Articles of Incorporation, Code of Ethics, Bylaws, Consumer Complaint Procedures, Resolutions, Regulations, Rules and Requirements. You will also be required to adopt, and be bound by, NATB's refund and cancellation policies, which may require more than your present policy.

X _____ (Name)

X _____ (Name)

X _____ (Name)

X _____ (Name)

Payment must accompany application to be processed

**Membership is \$900.00/ year or
\$75.00 a month* or
Premium Membership at \$2,500.00**

Including additional locations is \$250 each – these locations do not have voting rights.

Additional Addresses: _____

Amount Received: \$ _____

Check # (Made Payable to NATB): _____

AmEx/MasterCard/VISA #: _____

Expiration Date: _____ CVV2 #: _____

Name on Card: _____

**\$75.00 monthly payments will be billed automatically to the credit on file. The monthly amount of \$75.00 is guaranteed through 2022.*

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

Company Name: _____

Application verified by: _____

Date Received: _____ Date Approved: _____