

National Speakers Association – Indiana Chapter
2008-2009 MEMBERSHIP APPLICATION

Date: _____

Please print legibly or type. If a returning member, please complete entire form and submit new photo(s) in a PDF format for promotional purposes. Membership renewal date August 31, 2008.

- Candidate** (Non-NSA New Member) **New Member** **Vendor** **Renewal**

Name: _____ Sponsor: _____

Company: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Bus. Phone: _____ Res. Phone: _____ Cell: _____

E-mail: _____ Fax: _____

Website: _____

MEMBERSHIP CATEGORIES

You may now pay online using your credit card at: www.nsa-indianspeakers.com

Category	Annual Dues	Requirements	Amt. Enclosed
<input type="checkbox"/> Member	\$75	Requires current membership in NSA Cash, check or payment online accepted	\$
<input type="checkbox"/> Candidate	\$350	Candidate may maintain membership for up to 24 consecutive months in anticipation of qualifying for NSA membership + affirm the NSA Code of Ethics	\$
<input type="checkbox"/> Vendor	\$200	Affirm the NSA Code of Ethics	\$

CHAPTER SEMINAR FEES

Monthly seminar fees may be paid online at: www.nsa-indianspeakers.com

<input type="checkbox"/> Member Seminar Fee - NSA: Indiana member	On Line Reservation - \$39	Check or credit card	\$
	Day of Event price - \$49	Cash or check	
<input type="checkbox"/> Visitor Seminar Fee	Day of Event price - \$59	Cash or check	\$

For additional information contact, **Hazel Walker**, Hazel@BNI.com

Please mail completed form along with payment to:
NSA-I c/o Perception Strategies, Inc., 5827 N. Post Road, Indianapolis, IN 46216

National Speakers Association – Indiana Chapter
2008-2009 MEMBERSHIP APPLICATION Date: _____

Member Name: _____

Committees - Recognizing that *NSA:Indiana* is successful because of its Committee volunteers; we believe that the value gained through membership is directly proportional to the value contributed to the Association. We encourage you to become involved in this stimulating, supportive and educational phase of Association life.

Please indicate the Committee area(s) on which you would be interested in serving:

- Membership
- Marketing and PR
- Programs
- Special Events
- Technology

College/University Affiliation: _____ **Highest Degree Earned:** _____

Professional Association Affiliations:

NSA and/or NSA-I Awards Received: _____

Other Association Awards Received: _____

Industry Focus: e.g. Healthcare, Automotive, Food Services _____

Topics for Website Listing: - Please list (in a phrase) up to three topic areas on which you speak.

1. _____
2. _____
3. _____

Program Description for Website Listing: Please provide a brief description of your speaking, program or occupational specialty in 50 words or less.

Photo – Please send a current photo of yourself to update the website. Email to Margie@matconsulting.com

For Administrative Purposes only:

Date: _____

Check No.: _____ Amount: \$ _____

Credit Card Type: _____

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