

**National Speakers Association- Illinois Chapter
MEMBERSHIP APPLICATION**

Please complete this application and mail with your check or fax with credit card information to:

Sue Black
Executive Director
National Speakers Association- Illinois Chapter
2306 Brookway Drive
Geneva, IL 60134-1719

Phone: 630-208-0776
Fax: 630-208-4935

_____ **MEMBER** **Annual Chapter Dues \$190**

Membership requires active membership in the National Speakers Association. To be a member of NSA and NSA-IL you must certify to have made:

1. Minimum of 20 fee paid speaking engagements in the last 12 months OR
2. Minimum of \$25,000 in speaking fees in the previous 12 months

DATA (attaching a business card with this info will be easier for you & the office!)

Name _____ Title: _____
Company Name: _____
Address _____ City _____ Zip _____
Phone: Business _____ Cell _____
E-Mail _____ Fax _____

PAYMENT INFORMATION

_____ Check payable to the National Speakers Association –Illinois chapter enclosed
Charge my _____ Visa _____ Master card
Account number _____ Exp. _____
Name as it appears on card _____
Billing address on credit card same as above _____yes _____no (if no, please furnish below)
Billing Address _____
Signature (required) _____