



National Speakers Association- Illinois Chapter MEMBERSHIP APPLICATION

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

Doree Kaforski
National Speakers Association- Illinois Chapter
625 N. North Court, Suite 300
Palatine, IL. 60067

Phone: 630-208-0776
Fax: 847-963-9861

<p><u> </u> MEMBER Annual Chapter Dues \$190</p> <p>Membership requires active membership in the National Speakers Association. To be a member of NSA and NSA-IL you must certify to have made:</p> <ol style="list-style-type: none"> 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
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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) _____

Please indicate any special activity/committee you would be interested in working on.
