



Mississippi Auctioneers Association

MEMBERSHIP APPLICATION

Name: _____

Business Name: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Business Phone: _____ Other Phone: _____

Fax #: _____ Email Address: _____

Auction School Attended: _____

MS Auction License # _____

Other states in which you are licensed as an auctioneer: _____

Auction Area of Interest: _____

MAA Yearly Membership Fee	\$100
(Optional) Auctioneer Scholarship Fund Donation	\$25
(Optional) Auctioneer Scholarship Fund Donation, Other Amount	\$ _____
Total Enclosed:	\$ _____

Signature: _____ Date: _____

**The MAA looks forward to your becoming a member.
MAIL THIS APPLICATION ALONG WITH YOUR CHECK
OR MONEY ORDER PAYABLE TO:**

Attn: Rhonda Barnes
Mississippi Auctioneers Association
c/o 2236 Highway 49, Brooklyn, MS 39425