## National Flea Market Association



## Membership Application Company or Corporate Name:

company of corporate Name	·		
Flea Market Name or Doing B	usiness as Name:		
*Please complete a separate	membership application for	or each market (including mu	ltiple market owners)
Contact Name:		Titl	e:
Address:			
Website:			
How did you hear about the N	IFMA?		
Website			
Referred by		Other	
COMPANY PROFILE			
Year opened:	Total Number of Booth	is:Indoor:	Outdoor:
Monthly Vendors:		Building Sq. ft.	
Parking Spaces:	Total Acres:	Annual Attenda	nce:
Number of Locations:	Months open:	Days open: _	
Thank you for sharing this inf MEMBERSHIP ELIGIBILITY Flea Market must have been i accepted and processed. Yearly Membership Dues:			ior to membership application being
· · ·			
<ul> <li>\$575 Regular Membership Per Market up to (\$3500 Maximum) Flea</li> <li>Market Owner/Representative/Operator</li> <li>Amount Enclosed</li> </ul>			
ASSOCIATION PROGRAMS: NFMA either has or is conside			nterest you.
Insurance	Trade Shows	Computer Software	Organized Retail Crime
Website		State Lobby Info	Marketing/Advertising
Credit Cards	ATM Machine	Anti-Counterfeiting	
Would you like to serve on a committee?			
Yes	No Interes	sts	
Please mail or email this application with your check or credit card information filled out at the bottom to NFMA, P.O. Box 436 Wales, WI 53183-9998 Questions: Please Contact Steve at 262-955-6605 email <u>NFMA@fleamarkets.org</u>			
Credit Card Number		Exp Date	CSV
Name on Credit Card			