



# Membership Application

Internal Use Only:

Code: \_\_\_\_\_

## Step 1: Member Information (please print all information)

Check here if you are self-employed

Full Name: \_\_\_\_\_  
(this person will receive NKBA mailings and is responsible for updating information)

Job Title: \_\_\_\_\_

Company Name: \_\_\_\_\_

Company Address: \_\_\_\_\_

City: \_\_\_\_\_ State/Province: \_\_\_\_\_

Zip/Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_

Work Phone: \_\_\_\_\_

How many employees are in your company? \_\_\_\_\_

Work E-mail: \_\_\_\_\_

Company Website: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State/Province: \_\_\_\_\_

Zip/Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_

Home Phone (optional): \_\_\_\_\_

Cell Phone (optional): \_\_\_\_\_

Home E-mail (optional): \_\_\_\_\_

Referred by: \_\_\_\_\_

I do NOT want NKBA mailings to be sent to my home address.

I do NOT want to receive e-mail from the NKBA.

I do NOT want to receive mail or e-mail from third parties.

### Canadian Residents:

I wish to opt-in to receive commercial electronic communications from the NKBA.

NOTE: Due to Canada's Anti-Spam Law, we are required to ask you for your consent to receive any commercial electronic communication from the National Kitchen & Bath Association (NKBA). If you do not opt-in, you will no longer receive any emails or other electronic communication containing commercial content from the NKBA (even if you are an active member of NKBA). Non-commercial electronic messages may still be sent.

### COMPANY CONTACT

Full Name: \_\_\_\_\_

Company Name: \_\_\_\_\_

Job Title: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Work E-mail: \_\_\_\_\_

## Step 2: Choose Your Industry Segment (select one primary segment)

Manufacturing

Retail Sales

Design

Building & Construction

Industry Partner - Trade Association, Media, etc.

## Step 3: Select Your Membership Dues

See Chart Industry Member Firm (select annual dues from the chart below)

\$115 Non-Revenue Branch Location

\$925 Associate Business Member (Industry Partner)

\$400 Individual Employee of a Non-Member Firm

\$400 Associate Individual Employee Member Associate

\$225 Branch Location

### SELECT A CHAPTER OF YOUR CHOICE: \_\_\_\_\_

Otherwise, one will be assigned based on the zip code of your preferred mailing

### INDUSTRY MEMBER FIRM DUES (based on kitchen and bath revenue)

Annual Revenue*	Annual Dues	Annual Revenue*	Annual Dues
<input type="checkbox"/> Less than \$100,000	\$185	<input type="checkbox"/> \$10 - \$15 million	\$3,100
<input type="checkbox"/> \$100,000 - \$500,000	\$250	<input type="checkbox"/> \$15 - \$20 million	\$3,700
<input type="checkbox"/> \$500,000 - \$1 million	\$370	<input type="checkbox"/> \$20 - \$40 million	\$6,175
<input type="checkbox"/> \$1 - \$1.5 million	\$430	<input type="checkbox"/> \$40 - \$100 million	\$7,400
<input type="checkbox"/> \$1.5 - \$2 million	\$590	<input type="checkbox"/> \$100 - \$200 million	\$10,500
<input type="checkbox"/> \$2 - \$3 million	\$710	<input type="checkbox"/> \$200 - \$500 million	\$11,750
<input type="checkbox"/> \$3 - \$4 million	\$1,025	<input type="checkbox"/> \$500 - \$750 million	\$12,500
<input type="checkbox"/> \$4 - \$5 million	\$1,200	<input type="checkbox"/> \$750 - \$1 billion	\$15,000
<input type="checkbox"/> \$5 - \$7 million	\$1,800	<input type="checkbox"/> > \$1 billion	\$17,500
<input type="checkbox"/> \$7 - \$10 million	\$2,325		

## Step 4: Payment

NKBA membership is good for 12 months from the date of processing.

Annual Membership Dues: \$ \_\_\_\_\_

Total Enclosed (U.S. funds only): \$ \_\_\_\_\_

Today's Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

### PLEASE INDICATE YOUR FORM OF PAYMENT

Check made payable to the NKBA

Credit card:  Visa  MasterCard  Am. Express  Discover

Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Cardholder's Name (please print): \_\_\_\_\_

CW Security Number (3 digits or 4 digits for AmEx): \_\_\_\_\_

Referred by: \_\_\_\_\_