

CONFIDENTIAL APPLICATION

FOR

MEMBERSHIP

National Aircraft Appraisers Association

THE SUBMISSION OF THIS FORM DOES NOT GUARANTEE ACCEPTANCE AS A MEMBER OF THE NAAA. THIS FORM IS USED TO EVALUATE AN APPLICANT'S FITNESS FOR MEMBERSHIP. EACH APPLICANT WILL BE JUDGED ON HIS/HER OWN MERITS AND NOT BY RACE, RELIGION, GENDER, OR ETHNIC BACKGROUND. THE APPLICATION PORTION OF THIS FORM DOES NOT CONSTITUTE AN AGREEMENT BY EITHER PARTY AND INVOLVES NO OBLIGATION OF ANY KIND. IT IS PURELY FOR INFORMATIONAL PURPOSES.

NATIONAL AIRCRAFT APPRAISERS ASSOCIATION
7 West Square Lake Road, Bloomfield Hills, MI 48302

Phone: (248) 758-2333 Fax: (248) 769-6084

PERSONAL INFORMATION

DATE: _____

NAME: _____

DATE OF BIRTH: _____

MARITAL STATUS: _____ NO. OF DEPENDENTS: _____

PRIMARY ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

PHONE BUSINESS: _____ PHONE HOME: _____

CELL PHONE: _____

EMAIL ADDRESS: _____

WEB SITE ADDRESS: _____

BEST TIME(S) TO REACH YOU BY PHONE: _____

PLEASE CHECK APPROPRIATE BOXES FOR AVIATION EXPERIENCE AND AERCRAFT RATINGS HELD.

PRIVATE_____ COMMERCIAL_____ ATP_____ MULTI-ENGINE _____

INSTRUMENT_____ SEA PLANE_____ FLIGHT INSTRUCTOR_____

MULTI-ENGINE INSTRUCTOR_____

TOTAL FLIGHT HOURS_____ SEL_____ MEL_____

AIRFRAME MECHANIC _____ (YEARS) _____

POWER PLANT MECHANIC _____ (YEARS) _____

AUTHORIZED INSPECTOR _____ (YEARS)_____

EMPLOYMENT DURING LAST 10 YEARS. LIST PRESENT POSITION FIRST

EMPLOYER JOB TITLE	DATES
_____	FROM_____ TO_____
_____	FROM_____ TO_____
_____	FROM_____ TO_____
_____	FROM_____ TO_____

HAVE YOU EVER BEEN INVOLVED IN AIRCRAFT APPRAISING (YES)___ (NO)_____

GIVE A BRIEF SUMMARY OF YOUR AVIATION BACKGROUND INCLUDING ANY APPRAISAL EXPERIENCE (FOR DETAILED INFORMATION PLEASE ATTACH ADDITIONAL PAGES)

WHY ARE YOU INTERESTED IN BECOMING A MEMBER OF THE NAAA?

PLEASE CHECK ONE: IF MY APPLICATION IS APPROVED I WILL OPERATE:

PART-TIME _____ FULL TIME _____

LIST THREE CHARACTER REFERENCES:

NAME _____ OCCUPATION _____

ADDRESS _____

PHONE: _____

NAME _____ OCCUPATION _____

ADDRESS _____

PHONE: _____

NAME _____ OCCUPATION _____

ADDRESS _____

PHONE: _____

Note: In order for this application to be processed you must submit the one time software license fee of \$600.00 by check, money order, or credit card. If the application is denied, your check or money order will be returned promptly, or your credit card will not be charged and the credit card information will be destroyed. If the application is accepted, the \$750.00 annual membership dues becomes due. This payment can be accomplished by:

- 1) A payment in full by check.
- 2) Monthly payments of \$65.00 per month via credit card debit.
- 3) Full payment via credit card debit.

NOTE: PLEASE COMPLETE ALL OF THE FOLLOWING INFORMATION IF YOU INTEND TO CHARGE YOUR MEMBERSHIP DUES.

ACCOUNT NUMBER: _____ (VISA) ___ (MC) ___

EXPIRATION DATE: _____

*CARD HOLDERS NAME: _____

ADDRESS CARD IS REGISTERED TO: _____

*Card must be in applicant's name. If applicant is using someone else's card please contact NAAA headquarters.

Upon being accepted as a member of the National Aircraft Appraisers Association (NAAA) I authorize the NAAA to debit the above credit card account for the items checked below (Please read carefully and check those that apply),.

_____ If you intend to pay your Software license fee by credit card please initial here and sign below. I hereby authorize the National Aircraft Appraisers Association to charge the above credit card for the software fee of \$600.00 stated above. I understand that if I am rejected for membership no charge will be made. If I am accepted as a member my card will be charged. I understand that this is a one-time non-recurring charge. I will receive my new member packet in the mail, which will include web site access, software, and database access instructions.

_____ If you intend to pay your annual dues by making monthly payments by credit card please initial here and sign below. I hereby authorize the National Aircraft Appraisers Association to charge the above credit card for my annual dues paid at the rate of \$65 per month. I understand that my card will be charged for the following month's dues on the 15th of each month, and that the charges will continue until I advise the Association in writing 30 days in advance of my desire to stop paying dues and leave the Association. I understand that I will not receive a monthly invoice or payment reference for each month's dues.

_____ If you intend to pay your annual dues by a one time payment on your credit card please initial here. You will be charged \$750 for the first year's dues and you will be billed for the next year about 45 days in advance of your membership's expiration.

IF YOU HAVE INDICATED THAT YOU WOULD LIKE CREDIT CARD PAYMENTS AND HAVE NOT INITIALED THE PROPER STATEMENTS AND SIGNED BELOW YOUR APPLICATION WILL NOT BE ACCEPTED.

I hereby agree that NAAA is authorized to use any subsequent credit card information that I submit to the association for my membership dues or other purchases I make upon my providing the information to an officer or employee verbally by telephone or other means.

I promise that upon being accepted as a member of the National Aircraft Appraisers Association I will protect any and all proprietary data that may be provided to me in writing, downloaded from an NAAA web site, or that I may acquire in any other fashion. I will not provide proprietary information, programs, databases, or any other materials belonging to NAAA to any other person(s) company, or entity, other than that which is authorized by NAAA to be provided to my clients. I understand that there may be criminal and civil penalties for doing so.

I also promise that I will abide by the NAAA's Ethics Rules as stated on the NAAA web site and that I will sign and return the ethics statement that will be forwarded to me upon my acceptance as a member.

SIGNED: _____ DATED: _____