

MEMBERSHIP APPLICATION



NBAA represents organizations and owner/operators using aircraft for business. NBAA's Professional member category is for any person with a pervasive interest in business aviation.

Professional Membership:

Please select one:

- PROFESSIONAL** **\$335**
Any person with a pervasive interest in business aviation who independently contracts with the business aviation community, including: contract pilots, flight attendants, maintenance personnel and similar functions.

- ASPIRING PROFESSIONAL** **\$95**
Recent graduates, current and former military, persons not currently employed.

- RETIRED PROFESSIONAL** **\$95**
Any person previously employed in business aviation.

- STUDENTS** **\$30**
Anyone currently enrolled in a high school, college or vocational program.

Professional members are restricted to participation by only one individual per membership and are allowed only one listing in the Products & Services section of the Member Directory and website. They are not eligible to exhibit, sponsor or advertise with NBAA, or access the NBAA Compensation Survey.

First Name: _____ Last Name: _____

Job Function/Title (if applicable): _____

Address: _____

City: _____ State: _____ ZIP: _____ Country: _____

Phone: _____ Fax: _____

Email: _____ Website: _____

Total Dues Amount: _____

Credit Card

- Visa MasterCard American Express Discover

Cardholder's Name: _____

Account No.: _____ Exp. Date: _____

Signature (required): _____ Date: _____

Print Name: _____ Title: _____

In accordance with the provisions of IRC Section 6033(e), 50 percent of your NBAA dues are not deductible for federal income tax purposes. NBAA dues are not deductible as a charitable contribution. Please consult your tax adviser for further guidance. Federal Tax ID: 52-1633654.

To Apply and Pay by Credit Card:

Fill out credit card information at left and send this enrollment form to NBAA by: (1) stamped envelope or (2) fax to 202-540-9249. By signing at left, I certify that all information contained herein is accurate and complete.

To Apply and Pay by Check:

Send enrollment form and check (payable to NBAA in U.S. Dollars) in stamped envelope to: **NBAA, Attn: Membership, P.O. Box 55481, Boston, MA 02205-5481**

Do you want your organization listed in the NBAA Member Directory? Yes No