



214 N. Hale St., Wheaton, IL 60187
 Tel: 630-510-4596 Fax: 630-510-4501
 info@nrhsa.org www.nrhsa.org

MEMBERSHIP APPLICATION

QUALIFICATIONS: Be an operating, brick and mortar HOBBY STORE with regular business hours, selling hobby related merchandise.

Submit the following with application:

- ◆ Recent photos of the inside and outside of your store. Photos MUST be submitted with this application or it can't be processed.
- ◆ Have a valid state sales tax resale number.
- ◆ Copy of your stores business license.

Company Name: _____

Company Address: _____

City/State/Zip: _____

Telephone: _____ **Fax:** _____

Email: _____

Website: _____

State Sales Tax Number: _____

Owners Name: _____

Signature: _____

Dues Amounts:

	<u><i>Gross Annual Store Sales</i></u>	<u><i>Annual Dues Amount</i></u>
_____	0-\$499,000	\$120
_____	\$500,000 - 1.5 Million	\$150
_____	\$1.6 Million - 3 Million	\$200
_____	\$3.1 Million +	\$250

Payment: (check one)

_____ Check for \$ _____, payable to "NRHSA" is enclosed.

_____ Charge my American Express, Visa or MasterCard. (circle one)

_____ Credit card # _____ Cardholder name (printed)

_____ Expiration date _____ CVV# _____ Signature