

National Tattoo Association, Inc. / NTA Cruisers Membership Application

FOR AN ARTIST MEMBERSHIP YOU MUST BE RECOMMENDED BY ONE TATTOO ARTIST MEMBER TO JOIN THIS ASSOCIATION

Questions call 407 319 0018

*Current members, renewals are due by deadline of October 1st of that membership year to maintain your MEMBER NUMBER #
We are currently accepting new memberships throughout the fiscal year July 1st -June 30th.

NEW COUPLE MEMBERSHIP / or CURRENT MEMBER #1 ___ #2 ___

- Couple Membership \$75 – (consists of 2 people) – each gets own Membership Certificate & a joint subscription for the **ONLINE NTA Newsletter Magazine** for the fiscal membership year, July 1st -June 30th.

CURRENT MEMBERS; PLEASE CHECK 1 CHOICE... I WISH TO KEEP MY CURRENT MEMBER ___ / I WISH TO HAVE MY MEMBER NUMBER DESCENDING ORDER___ (AT THE BEGINNING OF THE NEXT MEMBERSHIP FISCAL YEAR)

*RECOMMENDATION BY ONE ARTIST MEMBER TO JOIN THIS ASSOCIATION

Name _____ Phone _____

NAME #1 / Last _____ First _____

ARTIST ___ YRS ___ ENTHUSIAST ___ BIRTH DATE ___/___/___

NAME #2 / Last _____ First _____

ARTIST ___ YRS ___ ENTHUSIAST ___ BIRTH DATE ___/___/___

STUDIO ADDRESS _____ CITY _____

STATE _____ ZIP CODE _____ NATION _____

WORK PHONE (____) _____ CELL PHONE (____) _____ EMAIL _____

STUDIO ADDRESS _____ CITY _____

STATE _____ ZIP CODE _____ NATION _____

WE DO NOT GIVE OUT YOUR HOME PHONE NO. OR ADDRESS

GIVEN NAME (1) ON CERTIFICATE yes – no / or NICKNAME _____

GIVEN NAME (2) ON CERTIFICATE yes – no / or NICKNAME _____

ENTHUSIAST (FAN) WHO DID YOUR WORK? _____

MAY WE GIVE OUT **STUDIO PHONE # OR ADDRESS** ON REQUEST? / PHONE: YES ___ NO ___ ADDRESS: YES ___ NO ___

Would you like your website listed on the NTA website? YES ___ NO ___ ***Unchecked membership listing responses will be treated as a yes response.

* If ARTIST send: Business card and photos of yourself, shop and the work you've done.

** If ENTHUSIAST; send photos of yourself and the name (s) of the ARTIST (S) who did your work.