



Membership Application

NOTE: *In accordance with MADA By-Laws, please be advised that an applicant must have been in the antiques business for at least **one year** before applying for membership.*

Name of Business: _____

Business Address: _____

Name of Owner(s): _____

Mailing Address: _____

Home Telephone: _____ Business Tel # _____

Email: _____ Website: _____

of years in the antiques business? _____
What is your specialty or types of inventory? _____

Do you sell any reproductions or new merchandise? _____ If so, please state the percentage (%) and type of your inventory that is new: _____

Business hours: _____

List shows where you exhibit: _____

List (2) MADA members who are familiar with your business, and make sure they have agreed to be a reference. **NOTE:** *These references are required in order for your application to be considered.*

#1)

#2)

List other professional organizations or associations of which you are a member:

SIGNATURE: _____ DATE: _____

Annual dues will be billed upon acceptance. Make check payable to MADA.

Return this application to the MADA membership coordinator:

Elizabeth DeSimone
P.O. Box 45
Saco, ME 04072

Questions? Contact Elizabeth via email (membership@maineantiques.org)
or (207) 284-8657