



**THE NATIONAL SOCIETY OF ACCOUNTANTS (NSA)
AND THE MONTANA SOCIETY OF PUBLIC ACCOUNTANTS (MSPA):
YOUR ONE-STOP SOURCE FOR ALL YOUR ACCOUNTING AND TAX SOLUTIONS!**

SPECIAL 2 FOR 1 BONUS: SAVE \$75 ON YOUR FIRST YEAR NSA/ASPA DUES!

NSA/MSPA MEMBERSHIP APPLICATION

Name: Mr. Mrs. Ms. _____

Company Name _____

() ()
Phone Fax E-mail

MEMBERSHIP CATEGORIES

ACTIVE MEMBER: Active Members are required to meet continuing education requirements, completing a minimum of 72 credit hours in each three-year reporting cycle, with a minimum of 16 credit hours in any one year. Active Members must be in public practice and meet one of the following requirements. Check all applicable statements.

- I have a valid permit/license granted under state law for the public practice of accountancy and/or taxation:
 - Public Accountant License No./State _____
 - Accounting Practitioner License No./State _____
 - Tax Permit/License License No./State _____
 - Certified Public Accountant License No./State _____
- I am accredited by the Accreditation Council for Accountancy and Taxation®: ABA ATA ATP ARA
- I am enrolled to practice before the IRS. Enrollment #: _____
- I have an Associate, Baccalaureate or higher degree with a minimum of 24 semester hours in accounting. Highest degree : _____
- I have 3+ years experience in public accounting and/or taxation. Within 5 years of joining, I must meet at least one of the criteria for active membership outlined above.

ASSOCIATE MEMBER: Associate members, who are not eligible to vote or hold office, do not need to meet continuing education requirements. If you have the following qualifications, you are eligible for Associate Membership. Please check one:

- I am an owner, partner, or employee of an accounting and/or tax firm & do not meet Active Member requirements.
- I am employed in government, a financial institution, private sector business or a non-profit entity. My primary responsibilities are accounting and/or taxation.

NSA/MSPA JOINT DUES:

Active & Associate Members: \$199 for Both Memberships—a 28+% savings!

PAYMENT TYPE:

CHECK in the amount of \$199 (for NSA and ASPA dues) made payable to NSA enclosed:

Credit Card: Visa MasterCard Discover

Account #: _____ Exp. Date: _____

Signature: _____

AFFILIATIONS

Your type of practice: Corporation Partnership Sole Practitioner

LLC LLP Other

Your role in the practice: Sole practitioner Partner Principal

Employee Other: _____

Other professional accounting/tax associations to which you belong: _____

I hereby state that the above statements are correct to the best of my knowledge and belief. I further state that I will abide by the Constitution and Bylaws of the Society and will practice in strict conformity with the Code of Ethics and Rules of Professional Conduct adopted by the Society. (Please go to www.nsacct.org or call NSA at 703-549-6400 for NSA's Code of Ethics.)

Applicant Signature _____ Date _____

Sponsor Signature _____ Date _____



**3 Easy Ways to Join
NSA and MSPA and Save \$75!**

By Mail:
NSA
1010 N. Fairfax Street
Alexandria, VA 22314

By Fax:
703-549-2984

By Phone:
8:30am-5:00pm EST
800-966-6679

Limited-Time Offer. Offer valid on first year dues only.

IMPORTANT NOTE: A COPY OF YOUR PROFESSIONAL STATIONERY OR BUSINESS CARD MUST ACCOMPANY THIS APPLICATION.