

**THE NEBRASKA LOCKSMITHS ASSOCIATION, INC.**  
**APPLICATION FOR MEMBERSHIP**

An organization of lock experts whose purpose is to better the locksmith profession by interchanging trade information, Mechanical knowledge and creating good fellowship among its members who are pledged to deal honestly in every branch of the business and to co-operate with the lock manufacturer and the user for the maintenance of the security in the mechanism of the locks entrusted to them for service by the public.

I understand the aims and purposes of the Nebraska Locksmiths Association, and I feel that I qualify as a member for the reasons stated below. (Red is required – Blue is optional )

**FULL NAME** \_\_\_\_\_  
Last Name – First Name - Middle initial

**HOME ADDRESS** \_\_\_\_\_

**CITY** \_\_\_\_\_ **STATE** \_\_\_\_\_ **ZIP** \_\_\_\_\_ **PHONE** \_\_\_\_\_

**Email** \_\_\_\_\_ **Fax** \_\_\_\_\_ **Cell** \_\_\_\_\_

**SOCIAL SECURITY NUMBER** \_\_\_\_\_ **DATE OF BIRTH** \_\_\_\_\_

**PLACE OF BIRTH** \_\_\_\_\_ **SEX** \_\_\_\_\_ **SPOUSE'S NAME** \_\_\_\_\_

**COLOR OF HAIR** \_\_\_\_\_ **COLOR OF EYES** \_\_\_\_\_ **HEIGHT** \_\_\_\_\_ **WEIGHT** \_\_\_\_\_

**HAVE YOU EVER BEEN ARRESTED AND CONVICTED OF A FELONY** \_\_\_\_\_ **IF SO, GIVE DETAILS** \_\_\_\_\_

**Are Your Fingerprints ON FILE at Your LOCAL LAW ENFORCEMENT AGENCY?** \_\_\_\_\_

**BUSINESS NAME** \_\_\_\_\_

**BUSINESS ADDRESS** \_\_\_\_\_ **CITY** \_\_\_\_\_

**STATE** \_\_\_\_\_ **ZIP** \_\_\_\_\_ **PHONE** \_\_\_\_\_

**If other than above Email** \_\_\_\_\_ **Fax** \_\_\_\_\_ **Cell** \_\_\_\_\_

**Do you spend all your employable time in the Locksmithing field?** \_\_\_\_\_

**Do you derive the main source of your income from the Locksmithing field?** \_\_\_\_\_

**If not self-employed, please answer the following:**

**COMPANY OR INDIVIDUALS NAME** \_\_\_\_\_

**CITY** \_\_\_\_\_ **STATE** \_\_\_\_\_ **ZIP** \_\_\_\_\_ **PHONE** \_\_\_\_\_

**YOUR SUPERVISOR'S NAME** \_\_\_\_\_

**IN THIS COMPANY, WHAT IS YOUR POSITION?** \_\_\_\_\_

**DO YOU BELONG TO ANY OTHER LOCKSMITH ASSOCIATIONS?** \_\_\_\_\_ **IF SO PLEASE LIST** \_\_\_\_\_

**State The APPROXIMATE YEAR You STARTED In The Locksmithing Field** \_\_\_\_\_

**IF A RESIDENT OF NEBRASKA Or Do Work In This State, Please Give Your LOCKSMITHING REGISTRATION CERTIFICATE NUMBER** \_\_\_\_\_ **COUNTY** \_\_\_\_\_

**Did You Attend Any School Of Locksmithing?** \_\_\_\_\_ **WHICH ONE** \_\_\_\_\_  
\_\_\_\_\_ **DATE GRADUATED** \_\_\_\_\_

**REFERENCES: Please list as many as possible, up to three for each category**

**LOCKSMITH REFERENCES:**

**Name** \_\_\_\_\_ **Address** \_\_\_\_\_  
**City** \_\_\_\_\_ **Phone #** \_\_\_\_\_

**Name** \_\_\_\_\_ **Address** \_\_\_\_\_  
**City** \_\_\_\_\_ **Phone #** \_\_\_\_\_

**Name** \_\_\_\_\_ **Address** \_\_\_\_\_  
**City** \_\_\_\_\_ **Phone #** \_\_\_\_\_

**CHARACTER REFERENCES:**

**Name** \_\_\_\_\_ **Address** \_\_\_\_\_  
**City** \_\_\_\_\_ **Phone #** \_\_\_\_\_

**Name** \_\_\_\_\_ **Address** \_\_\_\_\_  
**City** \_\_\_\_\_ **Phone #** \_\_\_\_\_

**Name** \_\_\_\_\_ **Address** \_\_\_\_\_  
**City** \_\_\_\_\_ **Phone #** \_\_\_\_\_

**Name And Title Of Local Law Enforcement Body:** \_\_\_\_\_

**Do You Do Safe Work?** \_\_\_\_\_ **Repair Door Closer?** \_\_\_\_\_ **OR Any Other Type of Specialized Work?** \_\_\_\_\_

**Would You Be Willing to Interchange Trade Information and Mechanical Knowledge With Other Members Of This Association?** \_\_\_\_\_

**DO YOU KEEP AND MAINTAIN THE MANUFACTURERS SECURITY AND DO NOT DEFEAT THE INTENDED PURPOSE IN THE MECHANISM OF A LOCK?** \_\_\_\_\_

**Would You Take AN OATH to Keep Restricted Information If Accepted?** \_\_\_\_\_

**Will You Abide by The Ethics Set Forth by The Nebraska Locksmith Association?** \_\_\_\_\_

**I certify that the above statements are true, and I acknowledge the fact that my application may be investigated before my membership is accepted.**

**LEGAL SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_

**THIS APPLICATION FOR MEMBERSHIP REQUIRES THE APPLICANT'S PRESENCE AT A MEETING OR A FUNCTION OF THE ASSOCIATION, BEFORE IT WILL BE ACTED UPON.**

**DO NOT WRITE IN THIS SPACE / RETURN APPLICATION AND FEES**

**Membership number** \_\_\_\_\_ **TO:**  
**Application Mailed** \_\_\_\_\_ **by** \_\_\_\_\_  
**Application Rec'd** \_\_\_\_\_ **by** \_\_\_\_\_  
**Application Accepted** \_\_\_\_\_ **by** \_\_\_\_\_  
**Fees Received** \_\_\_\_\_ **by** \_\_\_\_\_  
**Application Rejected** \_\_\_\_\_ **by** \_\_\_\_\_

**\$10.00 shall accompany this form for processing (This is non-refundable).**

**Annual Dues are \$200.00**

**(\$150.00 of this is applied to education/discounted class fees).**

**Nebraska Locksmith Association, Inc.  
Eugene Hansen, Treasurer  
726 W 16<sup>th</sup> St**

**Alliance, NE 69301**