



**APPLICATION FOR INDIVIDUAL AFFILIATE MEMBERSHIP**

Affiliate Members shall be individuals who, while NOT engaged in the real estate profession as defined in Article V Section 3 and 4 of the Bylaws, have interests requiring information concerning real estate, and are in sympathy with the objectives of the Association.

I hereby apply for Individual Affiliate Membership in the Southland Regional Association of REALTORS® and submit the following information for consideration.

*(Please Print or Type)*

1. Name: \_\_\_\_\_ Date: \_\_\_\_\_
2. Firm Name: \_\_\_\_\_
3. Firm Address: \_\_\_\_\_
4. Firm City: \_\_\_\_\_ Driver's License #: \_\_\_\_\_
5. Firm State: \_\_\_\_\_ Firm Zip: \_\_\_\_\_
6. Firm Phone #: \_\_\_\_\_ Firm Fax: \_\_\_\_\_
7. Cell Phone #: \_\_\_\_\_ Website: \_\_\_\_\_
8. Email: \_\_\_\_\_
9. Applicant Signature: \_\_\_\_\_

**Primary Type of Real Estate Served: Residential or Commercial**

**Type of Business: Check Appropriate Box For Your Company Type – Choose only One.**

<input type="checkbox"/>	Accountant	<input type="checkbox"/>	Environmental Rpts	<input type="checkbox"/>	Pest Control
<input type="checkbox"/>	Advertising & Mrktg	<input type="checkbox"/>	Escrow	<input type="checkbox"/>	Photography
<input type="checkbox"/>	Appraiser	<input type="checkbox"/>	Financial Services	<input type="checkbox"/>	Property Mgmt/Leasing
<input type="checkbox"/>	Association	<input type="checkbox"/>	Geology/Research/Land	<input type="checkbox"/>	Real Estate Training
<input type="checkbox"/>	Attorney	<input type="checkbox"/>	Home Staging	<input type="checkbox"/>	Research
<input type="checkbox"/>	Bank/Savings,Loans	<input type="checkbox"/>	Home Warranty	<input type="checkbox"/>	Retrofitting
<input type="checkbox"/>	Commercial Lending	<input type="checkbox"/>	Inspection	<input type="checkbox"/>	Reverse Mortgage
<input type="checkbox"/>	Contractor	<input type="checkbox"/>	Insurance	<input type="checkbox"/>	Services
<input type="checkbox"/>	Credit Reporting	<input type="checkbox"/>	Mediator	<input type="checkbox"/>	Tax Consulting
<input type="checkbox"/>	Designer	<input type="checkbox"/>	Mortgage Banker	<input type="checkbox"/>	Technology Services
<input type="checkbox"/>	Developer	<input type="checkbox"/>	Mortgage Broker	<input type="checkbox"/>	Title Company
<input type="checkbox"/>	Disclosure Co	<input type="checkbox"/>	Notary	<input type="checkbox"/>	Travel & Leisure

I agree to abide by the association's Bylaws; rules and Regulations of the Association; the Bylaws and Constitution of the CALIFORNIA ASSOCIATION OF REALTORS®, and all future amendments thereto.

I further agree to pay the established dues as long as I remain a member of the Southland Regional Association of REALTORS®. DUES ARE PAYABLE ANNUALLY AS OF JANUARY 1, AND CONSIDER DELINQUENT IF NOT PAID BY FEBRUARY 1. DELINQUENT DUES ARE SUBJECT TO A LATE CHARGE AS ESTABLISHED BY THE BOARD OF DIRECTORS. FAILURE TO PAY DUES BY FEBRUARY 21 WILL RESULT IN TERMINATION OF MEMBERSHIP.

MEMBERS WHO HAVE BEEN TERMINATED FOR NON-PAYMENT OF DUES MAY REINSTATE WITHIN THE CURRENT CALENDAR YEAR UPON PAYMENT OF A PROCESSING FEE EQUAL TO THE CURRENT SRAR APPLICATION FEE, Reinstatement FEES AS REQUIRED BY THE CALIFORNIA ASSOCIATION OF REALTORS®, AND OUTSTANDING DUES PRORATED TO THE END OF THE CALENDAR YEAR. DUES & FEES ARE NON-REFUNDABLE.

I understand that I shall receive the services, which are accorded to Firm Affiliate Members as they are set forth in the Membership Rules, and that I shall not have access to confidential MLS material.

**For Association Use Only**

Member Number: \_\_\_\_\_ Firm Number: \_\_\_\_\_ Data Processing Class: \_\_\_\_\_

Check #: \_\_\_\_\_ or Cash or VISA / MC / AMEX / DISCOVERY: \_\_\_\_\_

Total Amount	SRAR Dues	CAR	SRAR Process.Fee	CAR Application	MISC.