

Member # _____ Dues _____ Application Fee _____ Primary/Secondary _____



Central Carolina REALTORS® Association

Application for Affiliate Membership

Current Affiliate: Yes ☐ No ☐

Company Information

Compay Name _____

Office Address: _____ City: _____ Zip: _____

Office Phone No. _____ Primary E-Mail Address _____

Company website: _____

Contact Information

Have you EVER held membership with Central Carolina REALTORS® Association?: Yes ☐ No ☐

If "Yes" please list the timeframe: _____

Current Contact Name: _____

Position with Company: _____

Cell Phone No. _____ Primary E-Mail Address _____

References

List two professional references, preferably REALTORS®, excluding members of your company.

Name: _____ Company _____ Phone No. _____

Name: _____ Company _____ Phone No. _____

Getting Involved (Check all the membership opportunities that interest you!)

☐ Membership Luncheons ☐ Hosting Lunch and Learns ☐ Networking☐ Serving on a Committee ☐ Presenting to Brokers ☐ Political Activities☐ New Member Orientations ☐ Sponsoring Events ☐ Community Service☐ New Affiliate Recruitment ☐ Fundraising

Continue on next page ->

In applying for Affiliate Member status with the Central Carolina REALTORS® Association, I/we agree to support and uphold the high standards of conduct in the real estate industry as expressed in the REALTOR® Code of Ethics, to support the interest of real property ownership, and to safeguard the use of the term REALTOR®. I agree that, if accepted for membership in the Association, I shall pay the fees and dues as from time to time established. I hereby certify the foregoing information furnished by me is true and correct, and I agree that failure to provide complete and accurate information as requested, or any misstatement of fact, shall be grounds for revocation of my membership if granted.

Applicant Signature: _____ **Date:** _____

**Please submit this completed and signed application to
admin@ccrasc.com or submit to our office.**