



MID-STATE
ASSOCIATION OF
REALTORS, INC

APPLICATION FOR MEMBERSHIP

I hereby apply for AFFILIATE membership in the Mid-State Association of REALTORS®, Inc. I understand that Affiliate memberships are individual memberships and therefore each designated affiliate in a company must submit an application and pay the required fees. I understand that I must pay local and State Association Fees each year and a \$75 application fee are also required when applying for membership.

I agree to abide by the Code of Ethics of the NATIONAL ASSOCIATION OF REALTORS®, and the Constitution, Bylaws and Rules and Regulations of the Mid-State Association of REALTORS®, Inc., the State Association, and the National Association, as each may be amended from time to time. If required, I further agree to satisfactorily complete a reasonable and non-discriminatory written examination on such Code, Constitutions, Bylaws, and Rules and Regulations. I consent that the Association, through its Membership Committee or otherwise, may invite and receive information, and that comments furnished to the Association by any person in response to the invitation shall be conclusively deemed to be privileged and not form the basis of any action by me for slander, libel, or defamation of character.

I hereby submit the following information for your consideration:

NAME: _____ MISS _____ MR. _____
MS. _____ MRS. _____

FIRM NAME: _____ PHONE: _____

FIRM ADDRESS: _____ FAX: _____

CITY, STATE, ZIP: _____

HOME ADDRESS: _____

CITY, STATE, ZIP: _____

PHONE: _____ FAX: _____

EMAIL ADDRESS: _____

Are you now, or have you been a member of any Board/Association of REALTORS? _____

Print Full name of Board/Association that you were/are a member of:

Please Indicate Membership status in above board: _____ Active _____ Inactive

If active, will you be retaining your membership in the Board/Association _____ yes _____ no

If yes, indicate your desired membership status in the Mid-State Association of REALTORS

_____ Primary (National, State & Local Dues paid through Mid-State Association

_____ Secondary (Local dues only—National & State dues paid through the other board.)

Name of Individual who referred you to us: _____

COMMITTEES: Are you interested in serving on one or more of the following committees?
Check appropriate boxes.

Affiliate _____
Budget & Finance _____
By-Laws & Policy _____
Education _____
Grievance _____
Christmas Wishes _____

Legislative _____
Professional Standards _____
Newsletter _____
Program _____
Technology _____
Easter Baskets _____

Please list any special qualifications/Interests/Experience that you have had that you feel would help you in serving on any of the committees you chosen.

I give the Mid-State Association of REALTORS permission to send me emails relevant to the real estate business. The Mid-State Association does not sell, rent or give out members email addresses.

Signature _____

Date: _____