



ARCADIA ASSOCIATION OF REALTORS®

Credit Card Authorization Form

I hereby authorize the Arcadia Association of REALTORS® to charge my credit card for the appropriate charges.
I understand the authorization will apply only to the charge(s) that I have specified.
I further understand it is my responsibility to update the AAR with new expiration dates and new credit cards I wish to use.

Date: _____

Name: _____ MLS ID#: A _____

Phone: (_____) _____

Type of Payment:

Annual REALTOR® Dues (N.A.R., C.A.R., A.A.R.)

Housing Affordability Fund (\$10)

(H.A.F. is an optional donation; please check if you would like to contribute)

California Association of REALTORS® Housing Affordability Fund is able to fund programs that help REALTORS® clients through your generous support.

REALTOR® Action Fund \$ _____ (\$20 min.)

(R.A.F. is an optional donation; please check if you would like to contribute)

REALTOR® Action Fund (R.A.F.) raises money to advance the goals of our REALTOR® political action committees (PACs) at the local, state, and federal levels of government.

Quarterly CRMLS fees

This Quarter Only CRMLS Fees

One Time Only Charge in the Amount of: \$ _____

Payment:

MasterCard

Visa

C.C. #: _____ CID #: _____ Exp. Date: _____
(Last 3 digits on back of card)

Signature: _____

For your protection, digital signatures are NOT accepted.

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