



ARCADIA ASSOCIATION OF REALTORS®

Application for Affiliate Membership

I hereby apply for Affiliate Membership with the Arcadia Association of Realtors®. I understand this application is not a guarantee of membership and that I will be notified if my membership is not accepted.

Items needed upon application:

Government Issued ID

Current Business Card

Referred to the AAR By: _____

I hereby submit the following information for your consideration:

NMLS® ID: _____
(If Applicable)

Name of firm: _____

Firm Address: _____

Firm Phone#: _____ Fax: _____

Cell Phone#: _____

Email Address: _____

Name of Applicant: _____

My title or position with the firm: _____

Company Website: _____

I agree to pay the established fees as long as I remain a member of this Association, and understand that present fees are:

Membership dues: \$ _____

It is understood that this application and the fees stated could include membership in the California Association of REALTORS®.

Payment:

C.C. #: _____ CID #: _____ Exp. Date: _____

(Last 3 digits on back of card)

Authorized & Certification

As an Applicant for membership in the within named Association, I certify that the answers given in this Application are true and correct, and I authorize said Association through its representatives to make such investigations through recognized credit or other channels as may be considered advisable to verify the statements herein made by me.

Signature: _____ Date: _____