



AFFILIATE MEMBERSHIP APPLICATION

SECTION I – OFFICE INFORMATION:

Name of Primary Affiliate Business Partner

First Name	Last Name	Email

Name of Company:

NRDS ID (to be assigned by TCRA Staff):

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Mailing Address:

Street	Suite

City	State	Zip Code

Phone:

Business	Fax	Cell

Website:

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Secondary Affiliate Business Partners (if applicable):

Name	Cell	Email

Name	Cell	Email

Name	Cell	Email

Specialty:

- Accounting
- Advertising
- Architectural Design
- Computer Services
- Construction
- Financial Services
- Home Warranty
- Inspection Services
- Interior Design
- Marketing Services
- Mortgage Services

- Pest Control
- Plumbing Services
- Real Estate Research
- Surveyors
- Tax Consultants
- Title Company
- Utility
- Other

SECTION II – Type of Membership:

I am applying for a **NEW Affiliate Office Membership.**

- (Your office is applying for new membership or transferring primary affiliate membership to TCRA.)

I am applying for **Secondary Affiliate Membership.**

- (Your office is already an Affiliate Member with TCRA.)

Are you currently an active member of another Board of Realtors®? Yes No

If yes, name of Board:

If yes, please indicate whether you are transferring your primary membership to the Thurston County REALTORS® Association or applying for secondary membership in the Thurston County REALTORS® Association:

Is your office currently a member of another board or association which is affiliated with the NATIONAL ASSOCIATION OF REALTORS®, or has your office held membership in another Board or Association with the last three years?

Yes No

If yes, list each Board and Association where membership was held, type of membership and approximate dates of membership:

SECTION III – TERMS & CONDITIONS:

I hereby apply for AFFILIATE membership in the Thurston County REALTORS® Association, along with this application, I am submitting \$100 application fee and annual affiliate dues in the amount of:

If this office is elected to membership, I agree to abide by the Constitution, Bylaws, Rules, and regulations of the Thurston County REALTORS® Association, the Washington REALTORS®, and the National Association of REALTORS®. I understand that Affiliate members shall not use the terms REALTOR®, REALTORS®, or REALTOR-ASSOCIATE, nor the imprint of the emblem seal of the National Association of REALTORS®. I agree that, if accepted for membership in the Board, I shall pay the fees and dues as established.

I hereby certify that 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.

Signature:

<input type="text"/>	<input type="text"/>
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Applicant

Date