

MADERA ASSOCIATION OF REALTORS AFFILIATE MEMBERSHIP APPLICATION

I hereby apply for Affiliate membership with the Madera Association of Realtors. I consent that the Membership Committee of the Madera Association of Realtors may conduct an inquiry that may be deemed necessary for my application for membership.

Firm Name:		
Primary Applicant	Name:	
DRE# (if applicab	le):	
Firm Address:		
City, State Zip Co	de	
Office Phone	Office Fax:	Cell Phone
E-Mail:		
Website:		
Please select th	he type of membership you or your cor	poration would like to participate.
\bigcirc	1-2 Members Annual Fee + website	\$240/year
\bigcirc	3-5 Members Annual Fee + website	\$360/year
\bigcirc	5+ Members Contact Office For Price	ce
	ip is billed from Sept 1 through August o member selection type thru end of cu September 1 st of the follow	
	membership now and to pay any prora current year and begin new billing Sep	
	Date	

The Association upon receipt of your application will contact you with the calculated proration.

Payment may be made by check or credit card to

MADERA ASSOCIATION OF REALTORS 405 North "I" Street, Suite C, Madera, CA 93637 (559) 673-2218 -- (559) 673-9050 Fax

<u>maderarealtors@gmail.com</u>
Website: www.maderarealtors.com

Please complete the following for additional members of your organization that will attend Association functions with you such as mixers, luncheons etc. Each member will be added to the email communications email list.

1-2	Members:
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	Secondary Member Name:
	Email Address:
	Contact #:
3-5 Membe	ers
	Secondary Member Name:
	Email Address:
	Contact #:
	Secondary Member Name:
	Email Address:
	Contact #:
	Secondary Member Name:
	Email Address:
	Contact #:
	Secondary Member Name:
	Email Address:
	Contact #:

Website fee includes your scrolling logo on the Association website's home page providing immediate membership access to your website.

Association Only			
Gmail Account	Website Update		
Constant Contacts	Master Account List.		
Affiliate List	Quick Books		
New member list	Affiliate List-Master		