



Ashland Board of REALTORS®
19 W. Main Street, Ashland, OH 44805
www.ashlandboardofrealtors.com
eo@ashlandboardofrealtors.com

AFFILIATE MEMBER APPLICATION

The undersigned hereby makes application for Affiliate Membership in the Ashland Board of REALTORS®. Upon approval, I agree to abide by the Rules and Regulations of the Ashland Board of REALTORS® and waive all claim against the officers, members and/or the Ashland Board of REALTORS® for any act in connection with the business of the Board and particularly, expelling or otherwise disciplining me as an Affiliate Member. The Membership level I choose below will be automatically renewed at the same level each year. Any intent not to renew membership must be given in writing within 30 days of the end of the calendar year. \$100 Application Fee must accompany this completed application along with the appropriate dues. In the event membership is denied, all fees will be returned.

Organization Name: _____

Phone: _____ Website: _____

Mailing Address: _____

Physical Address: _____

Same as above _____

Primary Contact: Name _____ Email: _____

If more than 1 person would like to receive ABOR Communications Please list on back, name and email address.

Billing Contact: Name _____ Email: _____

Brief Description of Business: _____

Check Affiliate Level Desired

Gold \$650

Silver \$500

Bronze \$375

Affiliate \$350

Authorized Signature: _____ Date _____