

Cleveland County Association of REALTORS®

Application for Affiliate Membership

P.O. Box 2407, Shelby, NC 28151-2407
Phone: 704-481-9335 Fax: 704-749-2581

Website: www.usamls.net/shelby
Email: ccarmis1@bellsouth.net

I hereby apply for _____ Primary _____ Secondary Affiliate Membership in the Cleveland County Association of REALTORS, enclosing my check for \$_____ which includes a non-refundable application fee of \$50.00. In the event of non-admission, I will be refunded the dues portion only of my payment. This application includes membership in the North Carolina Association of REALTORS®. In the event of my admission, I agree to abide by the Code of Ethics of the National Association of REALTORS®, and the Constitution, Bylaws and Rules and Regulations of the Cleveland County Association of Realtors®. I consent that the Association, through it's Membership Committee or otherwise, may invite and receive information and comment about me from any member or other person, and I further agree that any information and comment furnished to the Association by any person in response to the invitation shall be conclusively deemed to be privileged and not form the basis of any action by me for slander, libel, or defamation of character.

Firm Representative _____ Title _____

Home Address _____

City _____ State _____ Zip _____

Cell Telephone _____ Home Fax _____ Home Phone _____

Email _____ Previous Association Membership? _____ Yes _____ No

Firm Name _____

Firm Street Address _____ State _____ Zip _____

Firm Mailing Address _____ State _____ Zip _____

Firm Telephone _____ Firm Fax _____

Firm Website _____ Firm Email _____

Type of Business: _____

Is your firm a member of another REALTOR® Association: Yes _____ No _____

If "Yes" – the name of the Association: _____
(A Letter of Good Standing from the Primary Association is required)

You are authorized to contact the following references (REQUIRED):

Name _____

Address _____ Phone _____

Name _____

Address _____ Phone _____

Dated: _____ Signed: _____