

# APPLICATION FOR AFFILIATE MEMBERSHIP

## TALL PINES ASSOCIATION OF REALTORS®

Please check which membership class you are applying:

Affiliate      Additional Affiliate\*      Public Service      Honorary Student

Name of Company: \_\_\_\_\_

Type of Business: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

Contact Person: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Email Address: \_\_\_\_\_

Are you a member of an Institute, Society or Council affiliated with the NAR?

(NATIONAL ASSOCIATION OF REALTORS® Yes No

If yes, please indicate the name of the affiliate: \_\_\_\_\_

Please list any professional designations that you currently hold:

\_\_\_\_\_

\_\_\_\_\_

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, may be grounds for revocation of my membership, if granted.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Checks Payable To:

Tall Pines Association of REALTORS®

1217 Avenue M, Suite 110

Huntsville, TX 77340