## **ELKHART COUNTY BOARD OF REALTORS® INC.**

57225 Alpha Dr., Goshen, IN 46528 Phone (574) 875-3283 Fax (574) 875-7174 www.ecbor.com

## **APPLICATION FOR AFFILIATE MEMBERSHIP**

1.	Individual Name:					
2.	Your Title: Your Position:					
3.	Firm Name:	Website:				
4.	Firm Address:Street		City		State	Zip
5.	Office Phone ()	E-	Mail Address :			
6.	Cell Phone: Reason for joining the Board:					
7.	Are you required by the State of Indiana to hold a Professional License? Yes No (If the State of Indiana requires a license it will be necessary to submit a copy of your license with this application)					
8.	Are you actively engaged in the real estate business? Yes No If "Yes" please attach explanation.					
9.	Have you ever been a member of this Board? Yes No If "Yes" what years?					
10.	Has your membership in a Board of REALTORS ever been refused, suspended or terminated YesNo					
11.	Do you meet the requirements of membership for one of the Institutes, Societies or Councils of the National Association of REALTORS*? Yes If Yes, which one:					
12.	Are you doing business inElkhart CountySt. Joseph County Both. Are you a member of any other Board? If yes, please indicate the Boards you currently hold membership with:					
Fees:	Application Fee - *\$125.00 for all applicants  Annual dues are based on the quarter joined.	Jan – Mar Apr – June July-Sept Oct – Dec	\$200.00 - \$125. \$200.00 \$150.00 \$100.00 \$ 50.00 <>><>><>	2 <sup>nd</sup> + -	\$125.00 \$ 93.75 \$ 62.50 \$ 31.25	ime firm
a. b. c. d. e. f. g. h. i.	Submit application fee and annual dues amount to the Elkhar Application fee and dues will be refunded if not elected to me Consent to the Board's authorized representatives' inviting at Agree that any information received in connection with this a myself (slander, libel, defamation, fraudulent misrepresentat Waive, irrevocably, any and all claims against the Board, its of Certify that the information provided in this application is tru Understand that failure to provide complete and accurate inf By signature below, I authorize the Elkhart County Board of R or services deemed appropriate by the Elkhart County Board Affiliate membership is issued in the name of the individual, r South Bend Affiliate Members who wish to join ECBOR will passed.	embership; dues will be nd receiving comments application shall be concion, invasion of privacy, fficers, directors and more and correct; formation or any misstate lealtors to fax any mate of Realtors to the fax no not the company, and is ay \$125.00 annually – mate and the company, and is ay \$125.00 annually – mate and received the company.	invoiced upon memabout myself from a lusively deemed to etc.); embers for failing to mement of fact will brial advertising the cumber listed above. transferable by the embership fees pro	nbership approva any member or o be privileged and elect myself to r e grounds for ter commercial availa individual for a \$ -rated with proor	il.  ther person;  not form the  membership;  rmination of m  ability or qualit  \$50.00 fee.  f of membersh	basis on any civil action by ny membership; ty of any property, goods, nip.