



2020 AFFILIATE MEMBERSHIP APPLICATION

Name of Company: _____

Contact Person (one name): _____

Title: _____

Address: _____
(Street) (City) (Zip)

Phone: _____ Fax: _____

Email: _____

Nature/Type of Business: (Select One)

Advertising___ Attorney___

Chamber of Commerce___ Construction___

Home Inspectors___ Printers___

Insurance___ Surveyors___

Media___ Title Co. ___

Utilities___ Other___

Specify: _____

How long has the Company been in Business? _____

Have you filed an application with us before? Yes___ No___

If yes, under what company name? _____

Have you been convicted of a felony within the last seven years? Yes___ No___

If yes, please explain _____

I agree to abide by the bylaws of the Tri-Lakes Board of REALTORS®, the Missouri Association of REALTORS®, and the National Association of REALTORS®.

I understand that by providing the above mailing address, email address, telephone number and fax number, I consent to receive communications sent from the Tri-Lakes Board of REALTORS® Inc., Tri-Lakes Multiple Listing Services Inc., Missouri Association of REALTORS®, and the National Association of REALTORS® via U.S mail, email, tele-phone, facsimile, or any other forms of electronic communication, at those numbers/location.

One-Time Application Fee: \$100.00 \$_____

Annual Dues:

\$100.00 — 1st Qtr. (Jan1-Mar 31)

\$75.00 — 2nd Qtr. (Apr 1-June 30)

\$50.00 — 3rd Qtr. (Jul1– Sep 30)

\$25.00— 4th Qtr. (Oct 1-Dec 31)

\$25.00 – RPAC Investment

\$10.00 – Good Neighbor Fund Contribution

\$_____ Pro-rated by Qtr.

TOTAL Remittance: \$_____

Date: _____ Signature: _____

Note: Affiliate Membership is a company membership, not an individual membership.