

GULF COAST ASSOCIATION OF REALTORS® , INC.



141 DeBuys Road, Suite A
Gulfport, Mississippi 39507
(228) 896-3122

APPLICATION FOR AFFILIATE MEMBERSHIP

To: Gulf Coast Association of REALTORS® , Inc.

I, _____, hereby apply for Affiliate Membership in the above named Board/Association, and agree to the dues amount of \$ _____, as stated in the email and which I understand will be returned to me in the event my membership is not accepted. I consent that, and authorize the Board/Association, through its Membership Committee or otherwise, to invite and receive information and comment about me from any Member or other person, and I agree that any information and comment furnished to the Board/Association by any Member or other person in response to any such 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.

I hereby submit the following required information for your consideration: (print)

Firm Name: _____				
Individual Joining: (First) _____ (MI) _____ (Last) _____				
(Email Address): _____			Birth Date: _____	
Office Address: _____				
(Street, Suite, or Post Office Box)				
(City)	(State)	(Zip)	(Office #)	(Cell #)

I request membership be vested in the following name (representing company as their member):

(Joining Members Signature)	Date
Do you hold a real estate license? _____	License Number: _____
Do you hold a appraisal license? _____	License Number: _____
You are authorized to refer to the following Members of the Board/Association who know me and/or Designated Representative:	
_____	_____
(Name)	(Name)

I agree that, if accepted for membership in the Board/Association, I shall pay the fees and dues established by the Board of Directors.

Date: _____ Signed: _____