

St. Cloud Area Association of REALTORS®

2109 Troop Drive | Sartell, MN 56377

p| 320.253.7149

f| 320.253.9701

nicole@stcloudrealtors.com

Application for Affiliate Membership

I hereby apply for Affiliate Membership in the above Association.

Payment is enclosed in the amount of (see proration table below) \$_____.

Company Name _____

Contact Person _____

Type of business _____

Office Address _____

City | State | ZIP _____

Phone# _____ Fax# _____

E-mail _____ Website: _____

Are you a member of any other Association of REALTORS®? Yes No

If yes, name the Association: _____

Are you willing to serve on a SCAAR committee? Yes No

If yes, please indicate which committee(s) you are interested in:

- | | |
|---|---|
| <input type="checkbox"/> Affiliate Recruitment | <input type="checkbox"/> Government Affairs |
| <input type="checkbox"/> Education | <input type="checkbox"/> Humanitarian |
| <input type="checkbox"/> Equal Opportunity/Cultural Diversity | <input type="checkbox"/> Public Relations |
| <input type="checkbox"/> Golf Tournament | <input type="checkbox"/> Social Affairs |

Please let us know who referred you to SCAAR:

Referred by: Name _____ Office _____

The annual dues fee for Affiliate Membership is \$300.

Proration by month:

Jan	Feb	Mar	Apr	May	June
\$300	\$275	\$250	\$225	\$200	\$175
July	Aug	Sept	Oct	Nov	Dec
\$150	\$125	\$100	\$75	\$50	\$25

CHECK—payable to SCAAR; send with this form to: SCAAR 2109 Troop Drive Sartell, MN 56377

OR

CREDIT CARD— Fax to 320-253-9701 or email to: nicole@stcloudrealtors.com

VISA MasterCard Discover American Express

Name on card _____ Security Code _____

Card #: _____ Exp. Date _____ / _____

Signature

Date