

APPLICATION FOR AFFILIATE MEMBERSHIP

I hereby apply for Affiliate Membership in Northern Colorado Commercial Association of REALTORS® (NCCAR). I am encouraged to abide by NCCAR's constitution, Bylaws, Rules and Regulations, and the Code of Ethics of the National Association of REALTORS®. I irrevocably waive all claims against the Board, and particularly as to its or their acts in electing or failure to elect, advancing, suspending, expelling, or otherwise discipline me as an applicant or as a member.

I understand Affiliate membership in NCCAR is available to me only as I am not actively using my real estate license as an agent in

the service of of	hers.			
Name				
Ivanic				
Company		Phone		
Fax		E-mail		
Address				
City		State	Zip	
Home Address		Home Phone		
City		State	Zip	
		Type of Business		
How long in business		How long at current location		
Main or Branch Office		Number of Employees		
Corporation	Partnership	Sole Proprietorship		

Business References

NAME	FIRM	ADDRESS	TELEPHONE
1)			
2)			
3)			

<u>Joining During the Months of:</u> (Please Check the Appropriate Box)

January through December\$305.00April through December\$228.75July through December\$152.50October through December\$76.25

true and correct, and I agree that failure to provide grounds for revocation of my membership if granted.		nation as requested, or any misstater	ment of fact, may be			
Applicant's Signature	Applicant's SignatureDate					
Affiliate Membership referred by:						
Name						
T:						
Firm	Address					
Are you now a member of any other real estate Board If yes, give name of Board/Association		Yes	No			
Are you presently financially indebted to any former Are you now subject to an unresolved professional st YesNo If yes, please explain:	andards or arbitration hearing	award of this or any other Board/Ass				
Are you actively engaged in the real estate business?		Yes	No			
The following is for employing brokers only: Number of Agents licensed with your Firm (Please list all agents and attach a copy of their of lice						
INFORMATION F	FOR GOVERNMENT MON	ITORING PURPOSES				
The following information is requested by the Feder You are not required to furnish this information, but the basis of this information, nor whether you choose Agency is required to note race and sex on the basis initial below.	are encouraged to do so. The e to furnish it. However, if yo	law provides that an Agency may ne ou choose not to furnish it, under Fed	ither discriminate on deral regulations this			
I do not wish to furnish this information (in	nitials)					
Race or National Origin: American Indian, Alaskan Native Asian, Pacific Islander Black	Hispanic White Other Specify:	<u>Sex:</u> FemaleMale				
On the basis of sight or surname, the above informati			(rev 8/12)			

After receiving your application you will be sent an invoice.