

Washington State Commercial Association of REALTORS®

12131 113th Ave NE, Suite 101, Kirkland, WA 98034

Phone: (800) 254-6700 Fax: (425) 821-9494



APPLICATION FOR AFFILIATE MEMBERSHIP

Representative: _____ **Title:** _____

Company Name: _____

Company Address: _____

Company Phone: _____ **Company Fax:** _____

Other REALTOR® Association(s) you are involved with: _____

I would like to serve on the following committee:

- Communications
- Education
- Government Affairs
- Membership
- Professional Standards

2016 Annual Dues: \$260.00 per company branch, per year.

Dues are pro-rated quarterly as follows:	January 1 - March 31	\$260.00
	April 1 - June 30	\$247.50
	July 1 - September 30	\$235.50
	October 1 - December 31	\$222.50

One-time Application Fee \$ 50.00

Total: \$ _____

(Total includes: pro-rated dues plus

Application fee and/or charge card transactions

Payment Options:

Check # _____

VISA/Mastercard/American Express: _____ Exp: _____

(Add an \$11.50 fee for all charge card transactions.)

Signature: _____