



APPLICATION FOR AFFILIATE MEMBERSHIP

I understand that a GAAAR Affiliate Membership is open to all businesses/companies that have a working relationship with the Real Estate business. I acknowledge that as an Affiliate Member, voting on Association matters may be limited to general business that does not directly relate to Realtor members. I hereby apply for an Affiliate Membership with the Greater Alexandria Area Association of Realtors®, Inc.

Business Info.	Name _____ Address _____ Business Type _____ City _____ Zip _____ Telephone _____
Member Info.	Name _____ Address _____ Email _____ City _____ Zip _____ Telephone _____
General Information	<p>Member of another Realtor Association? ___ Yes ___ No Name _____</p> <p>Member of trade association? ___ Yes ___ No Name _____</p> <p>Are you willing to serve on a committee? ___ Yes ___ No Name _____</p> <p>Additional staff that will attend General Membership Meetings:</p> <p>Name _____ Email _____</p> <p>Name _____ Email _____</p> <p>Name _____ Email _____</p> <p>Name _____ Email _____</p> <p>Name _____ Email _____</p>

The above information is true and correct. By submitting this application, I agree to be bound by the Affiliate Code of Ethics. I understand that membership dues consist of a one-time new member fee and reoccurring annual dues.

Signature

Date