

**Las Cruces Association of REALTORS® Inc.**  
**APPLICATION FOR AFFILIATE MEMBERSHIP**

I hereby apply for Affiliate Membership in the Las Cruces Association of REALTORS® Inc., enclosing my check in the amount of \$\_\_\_\_\_. I agree to abide by the Constitution, Bylaws, and Rules and Regulations of the Las Cruces Association of REALTORS® Inc. I consent that the Association, through its Membership Committee or otherwise, may invite and receive information and comments about me from any member or other person, and I further agree that any information and comments furnished to the Association by any person in response to the invitation shall be deemed to be privileged and not for the basis of any action against me for slander, libel, or defamation of character.

**AFFILIATE INFORMATION:**

Name of Company: \_\_\_\_\_

Contact Person (only 1 name please): \_\_\_\_\_

Physical  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_  
Zip: \_\_\_\_\_

**Mailing (if different from physical)**

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

# of Employees: 5 or less \_\_\_\_\_ (\$160/yr)    6 - 10 \_\_\_\_\_ (\$260/yr)    11 + \_\_\_\_\_ (\$360/yr)

Telephone Number: \_\_\_\_\_ Fax \_\_\_\_\_ Number: \_\_\_\_\_

Website: \_\_\_\_\_ Email: \_\_\_\_\_

Are you actively engaged in the real estate business? If so, how? \_\_\_\_\_

Were you referred by someone? If so, who? \_\_\_\_\_

I agree to pay the dues as established from time to time:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**(Please leave blank - For LCAR Staff)**

Amount Paid: \$ \_\_\_\_\_ by Check # \_\_\_\_\_ or Cash  
Payment Received by: \_\_\_\_\_ Date: \_\_\_\_\_ Company Code: \_\_\_\_\_

*revised 7/09*