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2023 MAR AFFILIATE MEMBERSHIP APLLICATION (2 PAGES)

Affiliate Member			
MAR Affiliate Members may not lis Affiliate Membership does not offe	t properties on Caravan and are MA r access to the MLS.	AR Affiliates only (not C	AR or NAR).
Name (EXACTLY as it appears on y	your license):		
Nickname:			
Firm Name:			
Firm Address:(street)	(city)	(state) (zip)	
Your Office Direct Phone #:	Ext #	Your Office Fax	#:
List any dba's:			
Home Address:(street)	(city)	(state)	(zip)
Home Phone:	(req.) Home Fax:		
Cell Phone:	(req.)		
Pref. Phone: [] Cell [] Offi	ice Direct [] Home Pref. m	nail address: [] Firm	[]Hom
F-Mail Address: please print clear	rly		

2023 MAR AFFILIATE MEMBER DUES					
Annual Dues	\$335	Processing Fee: \$25	Total: \$360		
Dues Pro Rated Starting:					
October	\$255	Processing Fee: \$25	Total: \$280		
November	\$205	Processing Fee: \$25	Total: \$230		
December	\$100	Processing Fee: \$25	Total: \$125		

GENERAL TERMS AND CONDITIONS OF MEMBERSHIP

- 1. **Bylaws, policies and rules.** I agree to abide by the bylaws, policies and rules of the Malibu Board or Association, the bylaws, policies and rules of the California Association of REALTORS®, and the constitution, bylaws, policies and rules of the National Association of REALTORS®, all as may from time to time be amended.
- 2. **Use of the term REALTOR® OR REALTOR-ASSOCIATE®.** I understand that the professional designations REALTOR® and REALTOR-ASSOCIATE® <u>are federally registered trademarks of the National Association of REALTORS®("N.A.R.") and use of these designations are subject to N.A.R. rules and regulation.</u>
- 3. **Orientation**. I understand that if the Board or Association requires orientation, I must attend such orientation prior to becoming a member of the Board or Association.
- 4. **No refund**. I understand that my Board or Association membership dues are non-refundable. In the event I fail to maintain eligibility for membership for any reason, I understand I will not be entitled to a refund of my dues.
- 5. **Authorization to release and use information; waiver**. I authorize the Board or Association or its representatives to verify any information provided by me in this application by any method.
- 7. By signing below, I expressly authorize the Board or Association, or representatives to fax, e-mail, telephone or send by U.S. mail to me, at the fax numbers, e-mail, telephones and addresses above, material advertising the availability of or quality of any property, goods or services offered, endorsed or promoted by the Board or Association.

SIGNATURE		
I certify that I have read and agree to the all terms and c	onditions, and all information	n given is true and correct.
APPLICANT'S SIGNATURE	Date	
PAYMENT		
Total payment enclosed <u>\$</u>	.	
Membership dues applicable for remainder of calendar year.		
Check #:		
OR Credit Card Holder's Name:		
Card Number	Exp. Date	CID code:
hereby authorize the Malibu Association of REALTORS® to collect	my credit card payment for my Me	embership Dues, as indicated above
	Date:	

Once complete: file/save with your name, email to membership@mailburealtors.org or fax to 310.456.1809

Please allow up to 2 days for processing.

MAR hours: Mon – Thurs, 9:30 am – 4:30 pm

Membership is not final until your receive confirmation from MAR by email.

Thank you for your application.