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## 2022 MAR AFFILIATE MEMBERSHIP APLLICATION (2 PAGES)

Affiliate Member			
MAR Affiliate Members may not Affiliate Membership does not or	list properties on Caravan and are MAF ffer access to the MLS.	R Affiliates only (not CAI	R or NAR)
Name (EXACTLY as it appears o	n your license):		
Nickname:			
Firm Name:			
Firm Address:(street)	(city) (	state) (zip)	
Your Office Direct Phone #:_	Ext #	Your Office Fax #	<b>:</b>
List any dba's:			
Home Address:(street)	(city)	(state)	(zip)
Home Phone:	(req.) Home Fax:		
Cell Phone:	(req.)		
Pref. Phone: [ ] Cell [ ] O	ffice Direct [ ] Home Pref. ma	ail address: [ ] Firm	[ ] Hon
E-Mail Address: please print cle	early		

2022 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>	<del>.</del>	
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 <a href="mailto:membership@mailburealtors.org">membership@mailburealtors.org</a> 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.