
APPLICATION

AFFILIATE MEMBERSHIP

Ventura County Coastal Association of REALTORS®

AFFILIATE MEMBERSHIP APPLICATION

I hereby submit my application for membership with the Ventura County Coastal Association of REALTORS® as an Affiliate Member*.

P: 805-981-2100
F: 805-981-2107

Business Information

Business Name _____

Name of Principal to be shown on membership record _____

Business Address _____ City _____ State _____ Zip Code _____

Business Phone _____ Business Fax _____

Individual DBA Partnership Corporation LLC

If a corporation, Officers, Partners, Associates: _____

Contact Information

First Name _____ Middle Initial _____ Last Name _____

Home Address _____ City _____ State _____ Zip Code _____

Email _____ Mobile Phone _____

My Title or Position with the Business: _____

I hold a California Real Estate License: Yes No If yes, License #: _____

Explain License Status: _____

I agree to pay the established dues as long as I remain a member of the Ventura County Coastal Association of REALTORS® and understand that the present fees are:

Initiation and Setup Fee: \$50 Annual Individual Membership Dues: \$130 Per Employee

Signature _____ Date _____

Applicants agree to waive any claim against the association, or any of its officers, directors or members for any action in connection with the business of the association, particularly as to acts in electing, or failure to elect advancing, suspending or expelling the above named applicant for cause.

CREDIT CARD AUTHORIZATION FORM

I, _____, hereby authorize the Ventura County Coastal Association of REALTORS® to charge my credit card as per the details indicated below.

Name as shown on card Phone

Card Billing Address City State Billing Zip Code

American Express Discover Mastercard Visa

Card Number Exp. Date CVC Code Billing Zip Code

Signature

<ul style="list-style-type: none">• Initiation and Setup Fee: <input type="checkbox"/> \$50 <p>Annual Individual Membership Dues:</p> <ul style="list-style-type: none">• One (1) Employee <input type="checkbox"/> \$ _____ Dues are pro-rated monthly. Please reference the Affiliate Dues Schedule <p>Total Payment \$ _____</p>
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FAX OR EMAIL YOUR COMPLETED APPLICATION TO: 805-981-2107 - ASHLEY@VCREALTORS.COM