

Thank You

We here at BCAAR are honored to serve you as a new member and we value your input and participation.

Please take advantage of all our services and make plans to attend our many events throughout the year. These are wonderful opportunities to network with our many members.

BCAAR use only

Date received

Application Fee Paid

Affiliate Membership Application

APPLICANT _____

COMPANY NAME _____

TYPE OF BUSINESS _____

ADDRESS _____

OFFICE PHONE # _____

FAX # _____ **E-MAIL** _____

HOME PHONE # _____ **(Optional)**

I hereby apply for Affiliate membership in the Beaver Creek Area Association of REALTORS®. I understand that annual dues are non-refundable. I irrevocably waive all claims against BCAAR or any of its Officers, Directors or members for any act in connection with the business of the Association. I agree that if accepted for membership in BCAAR, I shall pay the dues as established annually and abide by the Association's Constitution and Bylaws.

As a representative of the above named company and as an applicant for membership in BCAAR, I certify that the answers given in the application are true and correct.

Authorized Signature _____ **Date** _____

Affiliate members shall be real estate owners and other individuals who, while not engaged in the real estate profession as defined by the Association's Bylaws, have interests requiring information concerning real estate and are in sympathy with the objectives of the Association.