



APPLICATION FOR PUBLIC SERVICE MEMBERSHIP

Public Service Membership – An individual interested in the real estate profession as an employee of or affiliate with educational, public utility, governmental or other similar organizations, but are not engaged in the real estate profession on their own account or in association with an established real estate business.

<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Miss <input type="checkbox"/> Ms. <input type="checkbox"/> Dr. <input type="checkbox"/> Other: _____	
Contact Person's Name:	<input type="checkbox"/> Jr. <input type="checkbox"/> Sr. <input type="checkbox"/> PhD <input type="checkbox"/> Other
Business/Organization Name:	
Business Address:	
City, State, Zip Code:	
Business Telephone:	Business Fax:
Business E-Mail:	
Business Website:	

I understand membership brings certain privileges and obligations as may be prescribed by the Board of Directors. Membership is final only upon approval by the Board of Directors and may be revoked should compliance of prescribed obligations not be met.

Upon approval of my membership by the Board of Directors, it is my understanding that I will be able to utilize the convenience of the Association office mail distribution system to distribute material of real estate interest to member offices of MLS, and have the option to participate in services made available to general membership. I understand that notice of my application for membership will be sent to all Brokers and any objection to my membership must be provided in writing.

In the REALTOR® publications, my organization/service should be identified as:

_____ Education

_____ Public Utility

_____ Government

_____ Other similar organization: _____

Sponsorship required: Provide below the name and signature of an active Business Partner or REALTOR® Member.

Sponsor Company Name

Sponsor Signature

Sponsor Address

Sponsor Contact Name Printed

Sponsor Phone #

Date

All applicants must sign:

I hereby certify that the foregoing information furnished by me is true and correct, and I agree that failure to provide complete and accurate information as requested, or any misstatement of fact, shall be grounds for revocation of my membership, if granted.

By signing below I consent that the REALTOR® Association (local, state, national) and their subsidiaries, if any (e.g. MLS, Foundation) may contact me at the specified address, telephone numbers, fax numbers, email address or other means of communication available. This consent applies to changes in contact information that may be provided by me to the Association in the future. This consent recognizes that certain state and federal laws may place limits on communications that I am waiving to receive all communications as part of my membership.

Applicant Signature: _____ Date: _____