



Office Assistant Membership Application

"We Look Forward To Having You As A Member"

I hereby apply for Office Assistant membership and in the event of my election, agree to abide by the bylaws and policies and procedures set forth by the Orlando Regional REALTOR[®] Association.

I irrevocably waive all claims against the Association, its officers, directors, or members, for any act in connection with the business of the Association, and particularly any acts in connection with the business of the advancing, suspending, expelling, or otherwise disciplining as an applicant or member.

I certify that I do not hold either an active Florida real estate broker's or salesperson's license or an appraiser's license and am not engaged in the brokerage or appraisal of real property or that my real estate license is active in a non-ORRA referral company.

I consent to and give my express written permission for the National Association of REALTORS[®], Florida Realtors[®], and the Orlando Regional REALTOR[®] Association to send me faxes at _____.

This type of membership entitles the member to receive e-mails and mail regarding association business and activities and to participate in the Supra lockbox system if needed. Whether assisting an agent or a broker, the broker will be held responsible for the assistant's membership dues.

Signature: _____ Date: _____

Office Assistant Membership Information

Contact Name: _____
 Firm Name: _____
 Firm Address: _____
 City/St/Zip: _____
 Office Phone: _____
 Office Fax: _____
 Office E-mail Address: _____
 Office Web Site Address: _____
 I certify that the above information is correct.
 Broker's Signature: _____ Date: _____
 Broker's Name: _____

Membership Dues

Application received by:	Total Dues/Application Fee:
November 1 - April 30	\$75.00
May 1 - October 31 (prorated)	\$37.50
Annual Renewal	\$75.00

For Office Use Only

Payment Method: Check MasterCard VISA AMEX Discover
 Account #: _____
 Exp. Date: _____
 Cardholder's Name: _____
 Cardholder's Signature: _____
 Member #: _____ Firm #: _____
 Date: _____