



West Volusia Association of REALTORS® Application for Affiliate Membership

I/we hereby apply for Affiliate” Membership in the West Volusia Association of Realtors®. Enclosed is \$_____ (\$125 annual dues are pro rated monthly). These dues are non-refundable. I agree to abide by the constitution, bylaws, and rules and regulations of the Association.

ARTICLE IV- MEMBERSHIP

Section 1 (C) Affiliate members. Affiliate Members shall be real estate owners or other individuals or firms who while not engaged in the real estate profession, have interests requiring information concerning real estate and are in sympathy with the objectives of the Association.

I hereby submit the following information:

Company Name: _____

Contact Person: _____

Title: _____

Business Address: _____

City, State, Zip: _____

Phone Number: _____

Fax Number: _____

E-mail Address: _____

Each office can have up to 4 people included in the membership.

List additional members below:

Name: _____ Email: _____

Name: _____ Email: _____

Name: _____ Email: _____

I hereby certify that I am in compliance with Article IV Section 1 (C) of the bylaws of the West Volusia Association of Realtors®.

Signature of Applicant: _____

Date: _____