



The Trusted Source for Real Estate
in the Desert Communities

APPLICATION FOR AFFILIATE MEMBERSHIP

Primary Member Name: _____ **Title:** _____

Firm Name: _____

Firm Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Firm Phone Number: _____ **Firm Fax Number:** _____

Cell Phone Number: _____ **Website:** _____

E-mail: _____

CDAR does not publish e-mail addresses nor sell, loan or rent member e-mail addresses. Important notices are sent to our members via email.

Primary Affiliate Membership <input type="radio"/>	Additional Affiliate Representatives <input type="radio"/>
Primary Member: \$120	1st Rep. Name: _____
Representative: \$50 ea.	2nd Rep. Name: _____
	3rd Rep. Name: _____

Payment Information (VISA, MasterCard or AMEX Only):

Credit Card #: _____ **Expiration Date:** _____

I hereby apply for Affiliate membership to The California Desert Association of REALTORS®. I agree to abide by all rules and bylaws governing Affiliate membership in the Association and understand that failure to pay annual dues will result in termination of membership with the Association and all Association activities. The undersigned **individual**, whose business is not in whole or in part buying, selling, exchanging, managing, leasing, renting, or dealing in real estate for others, hereby applies for affiliate membership. The individual who's name appears below is entitled to the all the benefits and privileges of the affiliate membership. Additional individuals from the same company may join as an Affiliate Representative and also be entitled to the same benefits and privileges. I understand that in the event that I fail to maintain eligibility for membership for any reason under the Association Bylaws, I understand I will not be entitled to a refund of dues and fees. I authorize The California Desert Association of REALTORS® to verify any information on this application. I waive any cause of action, including but not limited to, slander, libel, or defamation of character resulting from such verification or processing of this application or use of information gathered by The California Desert Association of REALTORS®, C.A.R., N.A.R., their agents, employees, committees, or members. I understand that the above statements are in addition to the Association Bylaws, to which I also agree. If my membership changes offices, I will notify the association of such change immediately. If the previous office I was with paid for the membership, I understand that I must pay for the new membership in order to remain active.

Signature: _____ **Date:** _____