



**AFFILIATE MEMBERSHIP APPLICATION**  
**LITCHFIELD COUNTY BOARD OF REALTORS® , INC.**  
 21 Prospect St., Suite E, Torrington, CT 06790 - 860-482-9816



I \_\_\_\_\_ hereby apply for  
 (First Name) (Middle) (Last Name)

**PRIMARY MEMBERSHIP**

**LOCAL-AFFILIATE (Local Dues Only)**

**SECONDARY MEMBERSHIP**

**AFFILIATE (Local & State Dues)**

(Check One of 2)

(Check One of 2)

Membership in the **Litchfield County Board of REALTORS® , Inc.** (hereinafter referred to as the Board).  
 Enclosed is payment in the amount of **\$100.00** for my one-time application fee and \$\_\_\_\_\_ for my  
 prorated membership dues payable directly to Litchfield County Board of REALTORS® , Inc

CONTACT INFORMATION:					
First Name				Middle Name	
Last Name				Suffix <input type="checkbox"/> Jr, <input type="checkbox"/> III, <input type="checkbox"/> Sr, <input type="checkbox"/> Etc.	
Nickname (DBA):					
Home Address:					
City:		State:		Zip:	
Home Phone:				Cell Phone:	
Primary E-mail:				Secondary E-mail:	
MEMBER MAILING ALTERNATE:					
Address:					
City:		State:		Zip:	

COMPANY INFORMATION/ OFFICE AFFILIATION:					
Office Name:					
Office Address:					
Office Phone:					
Office Mailing Alternate:					
Address:					
City:		State:		Zip:	

PREFERRED MAILING/CONTACT INFORMATION:	
Preferred Phone: <input type="checkbox"/> Home <input type="checkbox"/> Office <input type="checkbox"/> Cell	
Preferred E-mail: <input type="checkbox"/> Primary E-mail <input type="checkbox"/> Secondary E-mail	

APPLICANT INFORMATION:	
Are you currently a member of any other Association of REALTORS®? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, name of Association	
Type of membership held:	
Have you previously held membership in any other Association of REALTORS®? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, name of Association	
Type of membership held:	
If you are now or have been an member before, please provide the information below.	
Previous NAR membership (NRDS) #	
If yes, provide details:	

Applicant acknowledges that he/she shall agree, if elected to membership, to abide by the Constitution, Bylaws, and Rules and Regulations of the Local, State and National Associations/Boards, as applicable. Affiliate members are encouraged to abide by the basic principles established in the Code of Ethics of the National Association of REALTORS®.

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. I further agree that, if accepted for membership in the board, I shall pay the fees and dues as from time to time established. **NOTE:** Payments to Litchfield County

Board of REALTORS®, Inc. are not deductible as charitable contributions. Such payments may, however, be deductible as an ordinary and necessary business expense. No refunds.

By signing below, I consent that the REALTOR® Boards/Associations (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. By providing and/or updating your contact information, including any mobile or other phone numbers, you agree to be contacted by NAR, Connecticut REALTORS®, Litchfield County Board of REALTORS®, Inc. and their agents via text messages, SMS messages, and calls to cell phones including the use of artificial or pre-recorded message calls, as well as calls made via automatic telephone dialing systems or via email. You further agree to update the Board with any changes to your contact information and to permit the Board to update contact information with information provided by any multiple listing service as part and continuation of this consent. 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's Signature: \_\_\_\_\_ Dated: \_\_\_\_\_