

2012 Affiliate Membership

Company Information:	Type of Membership: ___ Corporate ___ Single Office ___ Individual		
Firm Name			
Address			
City		State	Zip
Phone		Fax	
Web – This address will be put on our website for our REALTOR® Members and the public to access.			
Email			
Type of Business:			
Contact Information (please complete additional forms for additional locations):			
Name of Primary Contact (Annual billing will be sent to this person)			
Email		Direct Phone	
Name of Secondary Contact			
Email		Direct Phone	

* Rates shown below **include** a one time application fee of \$50.00

RATES*:	Jan-Dec	Jul-Dec
Corporate Office(s)	\$400.00	\$225.00
Single Office	\$300.00	\$175.00

Note: An annual fee of \$25.00 will be assessed for additional representatives (see membership levels on back).

SCCAR USE ONLY	
Firm#: _____	
Member Code: _____	Firm Code: _____