

**REALTORS® Association of Indian River County, Inc.**  
**3250 67<sup>th</sup> Street**  
**Vero Beach, FL 32967**  
phone (772) 567-3510  
fax (772) 778-6490

**APPLICATION FOR AFFILIATE MEMBERSHIP**

I, hereby apply for Affiliate Membership in the above named Association, enclosing my check in the amount of \$ \_\_\_\_\_ which is to be returned to me in the event of non-election. I agree to abide by the Constitution, Bylaws and Rules and Regulations of the above named Association. I consent that the Association may invite and receive information and comment about me from any member or other person, and I further agree that any information and comment furnished to the Association by any person in response to the invitation shall be conclusively deemed to be privileged and not form the basis of any action by me for slander, libel, or defamation of character.

Applicant's name \_\_\_\_\_

Firm name \_\_\_\_\_

Firm address: \_\_\_\_\_  
(Street)

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Business Phone \_\_\_\_\_ Fax \_\_\_\_\_ Cell Phone \_\_\_\_\_

e-mail \_\_\_\_\_ Website \_\_\_\_\_

Home address: \_\_\_\_\_  
(Street)

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Type of business \_\_\_\_\_

Applicant's position with firm \_\_\_\_\_

I hereby certify that:

- I am not associated with a firm selling real property.
- I further understand that this category of membership does not entitle me to use the designation **REALTOR®**, or the **REALTOR® logo**.
- You are authorized to refer to the following members of this Association who know me:

Name \_\_\_\_\_ Address \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_

I agree that, if accepted for Membership in the Association, I shall pay the fees and dues as from time to time established.

Dated \_\_\_\_\_ Signed \_\_\_\_\_