

AFFILIATE MEMBERSHIP APPLICATION

I hereby apply for **AFFILIATE Membership** in the Seacoast Board of REALTORS®. I hereby submit the following information for your consideration:

Company Name: _____

Applicant/Contact Person: _____

Address: _____

Mailing Address (if different): _____

Telephone Number: _____ **FAX:** _____

Cell Phone Number: _____ **Job Title:** _____

E-Mail Address: _____

Are you a Licensed/certified appraiser? YES NO

Loan Officer? YES NO **NMLS #** _____

Are you a member of another NH Board of REALTORS: YES NO

If YES, please list Board(s) name(s): _____

Do you belong to the N.H. Association of REALTORS: YES NO

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

Signature: _____ **Date:** _____

One-time Application Fee: \$225.00 **plus prorated dues (call board office) per individual**

It is optional to join NHAR. If you choose to Join NHAR, please add \$120.00 to the total.

Please make check payable to:

Seacoast Board of REALTORS®

110 Corporate Drive, Suite 4, Portsmouth, NH 03801

Telephone: 603-433-9990 ---- FAX: 603-433-9909

YES, I do wish to receive Broker Open House broadcast emails.

NO, I do not wish to receive Broker Open House broadcast emails.