



Fort Hood Area Association of REALTORS®

Application for Affiliate Membership

email application to debbie@fhaar.org

NRDS # _____

Name of Organization: _____

Address of Organization: _____

Type of Organization/Business: _____

i.e., mortgage bank, plumbing, civic, contracting

Member Name: _____

Last

First

()

()

Date of Birth

Phone or Cell

Fax

Primary email address: _____

this will be the primary method of invoicing, notification and general communication with you

Is anyone with this organization licensed to practice real estate in Texas?

If so please identify: _____

On behalf of the Organization named above I hereby apply for Affiliate or Affiliate (Local) Membership with the Fort Hood Area Association of REALTORS®. All applications are subject to approval by the FHAAR Board of Directors at their next regular meeting. I agree to abide by all By-Laws and Policies of FHAAR. This includes payment of all dues and/or fees when due. I further agree to keep my membership profile, including all contact information with FHAAR up to date. Affiliate dues include Texas Association of REALTORS® dues. Affiliate (local) dues are local dues only.

Printed Name _____

Date _____

Signature _____

Dues Paid _____

Membership Co-ordinator/Staff _____

Association Executive _____

Presented to board of directors for approval _____

Notes: _____
