



SCOTTSDALE MEMBERSHIP APPLICATION

Information about you...

Name _____ Company Name _____
Company Address _____
City/State/Zip _____
Business Phone (_____) _____ Bus Fax (_____) _____
Cell Phone (_____) _____ Other Fax (_____) _____
Residence Address _____
City/State/Zip _____
Birthday (Month/Day): _____
I would like mail sent to my: Business Residence
E-mail _____ Web Site _____
Local Chapter you are joining _____
Board of REALTORS® in which you hold membership (mandatory for all national members)

Type of membership held: __ REALTOR® __ REALTOR-ASSOCIATE® __ National Affiliate
Following question for National Affiliate applicants only—one of the above MUST be checked to become a National Affiliate WCR member.

Is your REALTOR® Board membership: Under your name? Your company name?
What year did you become active in real estate? _____
REALTOR® designations you have earned _____
NRDS ID# _____
Were you a national WCR member in the past 12 months? _____
If yes, what chapter? _____
I was referred by: _____

DUES AMOUNT OWED

National dues: \$111.00
State dues: \$29.00
Local dues: \$20.00
TOTAL DUES: \$160.00 (\$9 of your dues is a one-year subscription to Connections)

METHOD OF DUES PAYMENT

Check for \$_____ (payable to "WCR") is enclosed.
Charge \$_____ to my: Visa MasterCard American Express Discover (Only National Members)
Credit card # _____ Expiration _____
Signature _____

Please send completed application along with payment to:
Scottsdale Area Chapter Women's Council of REALTORS®
Attn: Vice-President of Membership
PO Box 13451
Scottsdale, AZ 85267

Or E-Fax application to Lyn Trayte at 888-818-3875