



**HUMBOLDT**  
ASSOCIATION OF REALTORS, INC.

**HUMBOLDT ASSOCIATION OF REALTORS®**  
**APPLICATION FOR AFFILIATE MEMBERSHIP**

**TYPE OF APPLICATION**

1. I apply for the following categories of membership: [ ] Affiliate Member

**GENERAL INFORMATION**

2. Name: \_\_\_\_\_
3. Nickname: \_\_\_\_\_
4. Firm/Company Name: \_\_\_\_\_
5. Firm Address: \_\_\_\_\_  
(street) (city) (state) (zip code)
6. Firm Telephone Number: \_\_\_\_\_ Firm Fax Number: \_\_\_\_\_
7. Cell Number: \_\_\_\_\_
8. List all other DBAs: \_\_\_\_\_  
\_\_\_\_\_
9. Home Address: \_\_\_\_\_  
(street) (city) (state) (zip code)
10. Home Telephone Number: \_\_\_\_\_ Home Fax Number: \_\_\_\_\_
11. Which do you want as the primary mailing address? [ ] Firm [ ] Home
12. E-Mail Address: \_\_\_\_\_ Birth Date (M/D/Y): \_\_\_\_/\_\_\_\_/\_\_\_\_
13. Professional Designations: (please specify) : \_\_\_\_\_
14. Primary Specialty: \_\_\_\_\_
15. List all Boards/Associations of REALTORS® and MLS to which you CURRENTLY BELONG:

\_\_\_\_\_  
\_\_\_\_\_  
List all Boards/Associations of REALTORS® and MLS to which you PREVIOUSLY BELONGED:

\_\_\_\_\_  
\_\_\_\_\_

**GENERAL TERMS AND CONDITIONS OF MEMBERSHIP**

1. **Bylaws, policies and rules.** I agree to abide by the bylaws, policies and rules of the Board/Association, the bylaws, policies and rules of the California Association of Realtors®, and the constitution, bylaws, policies and rules of the National Association of REALTORS®, all as may from time to time be amended.
2. **No refund.** I understand that my Board/Association membership dues and MLS fees are non-refundable. In the event I fail to maintain eligibility for membership or for MLS Services for any reason, I understand I will not be entitled to a refund of my dues or fees.
3. By signing below, I expressly authorize the Board/Association to fax, e-mail, telephone or send by U.S. mail to me, at the fax numbers, e-mail, telephones and addresses above, material advertising the availability of or quality of any property, goods or services offered, endorsed or promoted by the Board/Association.

**SIGNATURE**

**I certify that I have read and agree to the terms and conditions of this application and that all information given in this application is true and correct.**

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Signature of Applicant

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Date of Signature