

# Kent County Association of REALTORS®

519 S Red Haven Lane, Suite B, 2<sup>nd</sup> Floor, Dover, DE 19901 Phone: (302) 678-9750 Web: <u>www.kcar.realtor</u> Email: info@kcar.org

#### **Application for Affiliate Membership**

NEW CHANGE

Date:

Company: \_\_\_\_\_

The members of the Kent County Association of REALTORS® desire to establish relationships with individuals or firms who, while not engaged in real estate sales or real estate appraisal profession, have interests requiring information concerning real estate and are in sympathy with the objective of the Association. While Affiliate Members are not eligible to vote or hold elective office, they are encouraged to participate in special meetings and are eligible to use a variety of Association services conditioned upon Affiliate Member's full compliance with the Association's Bylaws, Rules & Regulations and Policies & Procedures.

I have chosen the Sponsorship level of:

Blue Hen (\$700)

First State (\$300)

Enclosed is my check in the amount of \$\_\_\_\_\_(*I understand that the dues are to be paid in full, prorated by quarter*)

Contact Name:	
Type of business: i.e., home inspection, mortgage,	etc
Mailing Address:	
Office Phone: Fax:	Cell:
Web Site: Email Address	5:
Signature and Title of Applicant:	

### The Voice of Real Estate in Central Delaware

#### Kent County Association of REALTORS®

Affiliate Membership Packages



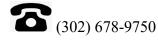
**KCAR AFFILIATE PACKAGES** 



#### A La Carte Options:

- ✓ E-blasts \$80 each
- ✓ Social Media Posts \$25 each
- ✓ Teaching Opportunities for CE Certified Affiliates (cost of food)
- ✓ Additional Sponsorships (cost varies depending on event)









## **Credit Card Authorization Form**

Cardholder Name:
Billing Address:
Card Type: Visa MasterCard American Express Discover
Credit Card Number:
Expiration Date: / CVV#:
Amount to be charged: <u>\$</u>
I authorize Kent County Association of REALTORS® to charge the agreed amount as stated above to my credit card provided herein. I agree that I will pay for this purchase in accordance with the issuing bank cardholder agreement.
Printed Name:
Signature:

Date:_		
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