



# EASTERN CONNECTICUT ASSOCIATION OF REALTORS<sup>®</sup>, INC..

*The Voice for Real Estate in Eastern Connecticut™*

106 Route 32, Suite 4, North Franklin, CT 06254

Telephone: (860) 892-2595 Fax: (860) 892-2599

Web Site: <http://www.easterncrealtors.com>

Email: [info@easterncrealtors.com](mailto:info@easterncrealtors.com)



## Application for Affiliate Membership

Name: \_\_\_\_\_

Name of Firm: \_\_\_\_\_

Office Telephone #: ( ) \_\_\_\_\_ Fax #: ( ) \_\_\_\_\_ Cell Phone #: ( ) \_\_\_\_\_

Business Address: \_\_\_\_\_  
*Street City State Zip*

Mailing Address: \_\_\_\_\_  
*Street City State Zip*

Type of Business: \_\_\_\_\_

Firm Internet Home Page: <http://> \_\_\_\_\_

E-mail Address: \_\_\_\_\_@\_\_\_\_\_

ECAR Web Site Logon Information: Your user name will be the email address provided above. Passwords must be at least six characters consisting of letters and/or numbers and are case sensitive. I request the following password to access the web site:

\_\_\_\_\_.

\_\_\_ I do \_\_\_ do not wish to receive information from the Association by fax regarding the products and services of the Association. Association members/staff with whom you are acquainted:

\_\_\_\_\_

**Membership Dues:** Annual dues are prorated monthly. Please call the Association for the current amount due.

Eastern Connecticut Association of REALTORS<sup>®</sup> (ECAR) \$ \_\_\_\_\_

Connecticut Association of REALTORS<sup>®</sup> (CAR)\* \$ \_\_\_\_\_

Total Due at Application \$ \_\_\_\_\_

\*Joining the Connecticut Association of REALTORS<sup>®</sup> is optional. CAR benefits include frequent email updates and access to the members only side of their web site at [www.ctrealtor.com](http://www.ctrealtor.com). Annual dues are \$350.00 if you join ECAR and CAR, or \$195.00 if you join ECAR.

Please make your check payable to E.C.A.R.

\_\_\_\_\_ Date: \_\_\_\_\_

Member Signature

### CREDIT CARD AUTHORIZATION FORM

Payment to ECAR for

\_\_\_\_\_ specify service(s) or fee(s)\*

Charge my credit card \$ \_\_\_\_\_. Type of Card\*:  Mastercard  Visa  Discover

Credit Card Number\*: \_\_\_\_\_ 3 digit Code\*: \_\_\_\_\_ Expiration Date\*: \_\_\_\_\_

Name on Credit Card\*: \_\_\_\_\_

Credit Card Billing Address \*: \_\_\_\_\_ Zip Code\*: \_\_\_\_\_

Signature\*

Date

\* required