



SAN FRANCISCO ASSOCIATION of REALTORS®



301 Grove Street
San Francisco, CA 94102
415.431.8500
www.sfrealtors.com

APPLICATION FOR AFFILIATE MEMBERSHIP

In applying for Affiliate Membership in the San Francisco Association of REALTORS®, I hereby submit the following information for consideration:

Name (as you wish it to appear in membership roster – 12 characters per first name & 12 per last name)

First Name: _____

Last Name : _____

Home Address: _____

Direct Telephone: _____

Email: _____ Website: _____

Birth Date: _____

Firm Name: _____

Firm Address: _____

Firm Telephone: _____ Firm Fax: _____

Which category best describes your company?

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> 1031 Exchanges | <input type="checkbox"/> Home Services | <input type="checkbox"/> Marketing Service | <input type="checkbox"/> Site Inspection |
| <input type="checkbox"/> Associations | <input type="checkbox"/> Home Warranty | <input type="checkbox"/> Media | <input type="checkbox"/> Technology |
| <input type="checkbox"/> Contractor/Trade People | <input type="checkbox"/> Insurance | <input type="checkbox"/> Mortgage Lender | <input type="checkbox"/> Title & Escrow |
| <input type="checkbox"/> Flooring | <input type="checkbox"/> Interior Design | <input type="checkbox"/> Moving & Storage | <input type="checkbox"/> Web/Computer |
| <input type="checkbox"/> Government | <input type="checkbox"/> Legal | <input type="checkbox"/> Property Management | <input type="checkbox"/> Other: |



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Affiliate Membership Benefits include:

- Networking Opportunities with REALTORS® and Brokers
- Exposure on the “Affiliates” Page of the SFAR website
- Eligible to serve as a voting member on a SFAR Committee
- Eligible to serve as Affiliate Director/Chair on the SFAR Board of Directors
- Registration for SFAR networking events
- Monthly Housing Statistics/Member’s Edge Access
- Exposure in the “Affiliate Spotlight” section of the Member’s Edge Monthly Newsletter
- Access to Members-Only Sections of the SFAR Website
- Access to SF MLS Tour Sheet

General Terms and Conditions of Membership

1. Bylaws, Policies and Rules and Regulations. I agree to abide by the Bylaws, Policies and Rules and Regulations of the San Francisco Association of REALTORS® (SFAR), the Bylaws, Policies and Rules of the California Association of REALTORS® (C.A.R.), the Bylaws, Policies and Rules of the National Association of REALTORS® (N.A.R.), all as may from time to time be amended.

2. **No Refund.** I understand that my Dues are non-refundable.

3. By signing below, I expressly authorize the San Francisco Association of REALTORS® and California Association of REALTORS® and their subsidiaries or representatives to fax or e-mail me, at the fax number and e-mails addresses above, material advertising the availability of or quality of any property, goods or services offered, endorsed or promoted by the Association.

(Applicant Signature)

(Date)

AFFILIATE FEES/DUES (January – December)

<u>APPLICATION FEE</u>		<u>ANNUAL DUES</u>	
	\$25.00		\$115.00*
January	\$115.00	July	\$57.50
February	\$105.42	August	\$47.92
March	\$95.83	September	\$38.33
April	\$86.25	October	\$28.75
May	\$76.67	November	\$19.17
June	\$67.08	December - January	\$124.58**

* The Membership fee is prorated monthly and changes on the 25th of each month to reflect the next period amount.

** Includes last month of December and dues for next year.

Email Application to: membership@sfirealtors.com



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Payment Authorization Form

Auto Bill Pay is for MLS Quarterly Fees and Supra Key Fees ONLY

[CLICK HERE TO MAKE PAYMENT VIA DOCUSIGN](#)

MEMBER INFORMATION

Member Name: **Member Number:**
 Check here if you are a new member *If unknown/unassigned, leave blank*

Firm Affiliation: Contact Phone:

TERMS

- I authorize the San Francisco Association of REALTORS® to deduct the following fees from the credit card/debit card I have specified below.
- I understand that, if I am a REALTOR® member of the San Francisco Association of REALTORS®, my annual membership dues will not be automatically deducted from the card I have specified below, and that a statement will be sent to me for Association membership dues each November or December to pay for the year following the invoice.

PAYMENT INFORMATION

Visa MasterCard American Express *Do not include CCV number*

Card Number: Exp Date: /
(month) (year)

Amount: \$

- One-Time Charge: Authorize a one-time charge for New Member, Reinstatement costs, and/or SFAR Supra Key/Lockbox fees from the card I have specified.
- Auto-Payment (for MLS/SUPRA): Authorize SFAR to deduct all fees, but not annual REALTOR® membership dues, from the card I have specified.

Cardholder's Name:

I have read and agreed to the terms of this payment arrangement, and I authorize the San Francisco Association of REALTORS® to deduct my fees and/or dues (other than annual REALTOR® membership dues) from the above specified Visa or MasterCard quarterly. I understand that I am responsible for notifying the San Francisco Association of REALTORS® of any changes to or cancellations of this agreement.

I understand that I may discontinue the automatic billing arrangement at any time but that service cancellations may take up to two weeks to process.

Signature: Date:

Return Payment Form to the SFAR Dept. or staff member that was assisting you. As a reference:

Accounting: ar@sfrealtors.com Membership: membership@sfrealtors.com MLS: mls@sfrealtors.com