Whatcom County REALTORS® 3323 Northwest Ave.
Bellingham, WA 98225
info@wcar.net
www.wcar.net
360-671-5477



## Affiliate Membership Application

## All Fields Required

Affiliate membership in the Whatcom County Association of REALTORS® is by company and designed for attorneys, lenders, appraisal companies, accounting firms, printers, newspapers, landscapers, moving companies, and any other businesses that would benefit from association membership.

WCAR Affiliates are eligible for member pricing for WCAR events, services, and on advertising and sponsorships. WCAR Affiliates are also included in our website's Affiliate Directory. To get the most out of your membership, you are encouraged to participate in WCAR committees, attend events, sponsor events, and offer member discounts.

WCAR Affiliate membership annual dues include membership in Washington REALTORS® per year, per location. If your company has multiple locations, each branch will have to join separately. The membership year runs from April 1st to March 31st. Each membership includes up to three representatives. Once completed, please send this application, and your high-resolution logo(s) to info@wcar.net.

Office Information:			
Office Name:			
Office Address:			
City:		State:	_ Zip:
Website:	Facebook/I	nstagram:	
Type of Business:			
☐ Accountant	☐ Appraiser	☐ Attorney	
☐ Construction	☐ Home Inspector	☐ Home Stager	
☐ Insurance	☐ Lender	☐ Marketing	
☐ Newspaper/Media	☐ Printer	☐ Restaurant/Caterer	
☐ Title Services	☐ Web Designer	☐ Other:	

Please list below:	ion/license to teach a	class for certification and/or clock nours?
Does this office have an Af	filiate membership wit	h another Association/Board?
If yes, which Association/Bo	oard:	
Office NRDS ID# if applicable	e:	
*If possible, please include high-resolution logo for ou		each representative with your application and a use.
•		y Representative is responsible for maintaining the wals and representative changes.
First Name:	M.I.:	Last Name:
Business Email:		Cell Phone:
☐ I agree to receive WCA	R text alerts to the abo	ove cell phone number.
Second Representative In	formation: (If applicab	le)
First Name:	M.I.:	Last Name:
Business Email:		Cell Phone:
☐ I agree to receive WCA	R text alerts to the abo	ove cell phone number.
Third Representative Info	rmation: (If applicable)	
First Name:	M.I.:	Last Name:
Business Email:		Cell Phone:
☐ I agree to receive WCA	R text alerts to the abo	ove cell phone number.
with its members is via ema (2)months in advance that v consent from all represents communications. I understa mass communications (via responsibility of the primar represented in this applicat to review and follow WCAR	ail and text messaging. your annual membershatives included on this and we may opt out at Mailchimp). Annual duly representative to ension are true to the beself's Bylaws, Policies, and	
Primary Representative Sign	nature:	Date:

Signature:	Date:
Notes:	
How did you hear about us?	
<ul><li>2.99% processing fee for Visa, N</li><li>1% processing fee for EFT - Ban</li></ul>	Mastercard, American Express, Discover, PayPal, Apple Pay &Venmo k Transfer
Online link for debit/credit ca	rds, sent via email. Please see processing fees below.
Check Whatcom County Association 3323 Northwest Ave Bellingham, WA 98225	of REALTORS®
Payment Options:	
*Please note employee count is ba	sed on actual company size, not desired number of participants.
☐ Large [10+ Employees]: \$599/	yr
Mid-Sized [4-9 Employees]: \$4	∮99/yr
☐ Small Business [2-3 Employees	s]: \$399/yr
Sole Proprietor [No Employee:	s]: \$199/yr
Affiliate dues are based off the size business:	ze of your company/business. Please check which option applies to your