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:	Faceboo	k/Instagram:	
Type of Business:			
☐ Accountant	☐ Appraiser	☐ Attorney	
☐ Construction	☐ Home Inspection	☐ Home Stager	
☐ Insurance	☐ Lender	☐ Marketing	
☐ Newspaper/Media	☐ Printer	☐ Restaurant/Caterer	
☐ Title Services	☐ Web Designer	Other:	

Do you have the accreditation/lice Please list below:	ense to teach a	class for certification and/or clock hours?
Does this office have an Affiliate m	embership wit	h another Association/Board?
If yes, which Association/Board:		
Office NRDS ID# if applicable:		
*If possible, please include a busir high-resolution logo for our websi		each representative with your application and a a use.
		ry Representative is responsible for maintaining renewals and representative changes.
First Name:	M.I.:	Last Name:
Business E-mail:		Cell Phone:
Second Representative Information	on: (If applicab	le)
First Name:	M.I.:	Last Name:
Business E-mail:		Cell Phone:
Third Representative Information	: (If applicable)	
First Name:	M.I.:	Last Name:
Business E-mail:		Cell Phone:
communicating with its members (2) months in advance that your arreceived consent from all represer communications. I understand we all mass e-mail communications (vyear, and it is the responsibility of certify that the answers represent that all representatives agree to re-	is via email. Yo nnual member ntatives includ may opt out a via Constant Co the primary re ted in this appli eview and follo	ciation of REALTORS®' primary way of u will be notified via e-mail approximately two ship dues are payable. I consent, and have ed on this application, to receive all these email trany time using the unsubscribe link provided in ontact). Annual dues are due April 1 of every expresentative to ensure those dues are paid. I cation are true to the best of my knowledge and ow WCAR's Bylaws, Policies, and Procedures.
Primary Representative Signature	:	Date:

Affiliate dues are based off the size of your company/business. Please check which option applies to your business:
Sole Proprietor [No Employees]: \$199/yr
Small Business [2-3 Employees]: \$399/yr
☐ Mid-Sized [4-9 Employees]: \$499/yr
☐ Large [10+ Employees]: \$599/yr
*Please note employee count is based on actual company size, not desired number of participants.
Payment Information:
☐ Via Check Whatcom County Association of REALTORS® 3323 Northwest Ave Bellingham, WA 98225
Online link for debit/credit cards, sent via email. Please see processing fees below.
2.99% processing fee for Visa, Mastercard, American Express, Discover, PayPal, Apple Pay &Venmo1% processing fee for EFT - Bank Transfer
How did you hear about us?
Notes:
Signature:Date: