



APPLICATION FOR MEMBERSHIP AFFILIATE

I hereby apply for Affiliate Membership in the **Greater Baltimore Board of REALTORS®**.

Dues: Enclosed is payment in the amount of \$_____ payable directly to the Greater Baltimore Board of REALTORS®. I understand that my dues will be returned to me in the event of non-election.

NOTE: When you receive your welcome email, login to www.gbbr.org/profile to update your member profile. The information included in your profile is searchable by the public and other GBBR members. Be sure to select your Affiliate Service Category, Specialty, and Language (if you speak multiple languages)

I hereby submit the following information for consideration of my application. (If additional detail is needed, please include separate documentation.)

COMPANY INFORMATION:			
Office Name:			
Office Address:			
Office Phone:		Fax:	
Company Type:	<input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> LLC (Limited Liability Company) <input type="checkbox"/> Other, specify _____		
Contact Name for Company:			

AFFILIATE INFORMATION					
First Name		Middle Name			
Last Name		Suffix	<input type="checkbox"/> Jr, <input type="checkbox"/> III, <input type="checkbox"/> Sr, <input type="checkbox"/> Etc.		
Nickname (DBA):					
Home Address:					
City:		State:		Zip:	
Home Phone:		Cell Phone:			
Primary Field of Business:					
Primary E-mail:		Secondary E-mail:			
NAR Membership # (NRDS)					
License #:		License Expiration Date:			
State of Licensure:		Date of Birth (DOB):			

AFFILIATE PREFERRED MAILING/CONTACT INFORMATION:	
Preferred Phone:	<input type="checkbox"/> Home <input type="checkbox"/> Office <input type="checkbox"/> Cell
Preferred E-mail:	<input type="checkbox"/> Primary E-mail <input type="checkbox"/> Secondary E-mail
Preferred Mailing:	<input type="checkbox"/> Home <input type="checkbox"/> Office
<input type="checkbox"/> Yes <input type="checkbox"/> No I give permission to GBBR to send text messages to my above listed cell phone number (estimated yearly messages less than 15)	

ADDITIONAL AFFILIATE INFORMATION	
First Name	Middle Name
Last Name	Suffix <input type="checkbox"/> Jr, <input type="checkbox"/> III, <input type="checkbox"/> Sr, <input type="checkbox"/> Etc.
Nickname (DBA):	
Home Address:	
City:	State: Zip:
Home Phone:	Cell Phone:
Primary Field of Business:	
Primary E-mail:	Secondary E-mail:
NAR Membership # (NRDS)	
License #:	License Expiration Date:
State of Licensure:	Date of Birth (DOB):

ADDITIONAL AFFILIATE INFORMATION	
First Name	Middle Name
Last Name	Suffix <input type="checkbox"/> Jr, <input type="checkbox"/> III, <input type="checkbox"/> Sr, <input type="checkbox"/> Etc.
Nickname (DBA):	
Home Address:	
City:	State: Zip:
Home Phone:	Cell Phone:
Primary Field of Business:	
Primary E-mail:	Secondary E-mail:
NAR Membership # (NRDS)	
License #:	License Expiration Date:
State of Licensure:	Date of Birth (DOB):

NOTE: If more than one additional affiliate is applying within this application please include the above information for each person.

NEW PRIMARY AFFILIATE MEMBER DUES STRUCTURE -2020

June 1, 2019 to June 30, 2020

Month	GBBR Local Dues	Total	2019 MD State Dues*	2020 MD State Dues*	Total including Optional MD State Dues
June	\$ 299.00	\$ 299.00	\$ 65.00	\$ 203.00	\$ 567.00
July	\$ 299.00	\$ 299.00	\$ 65.00	\$ 203.00	\$ 567.00
August	\$ 274.00	\$ 274.00	\$ 49.00	\$ 203.00	\$ 526.00
September	\$ 249.00	\$ 249.00	\$ 34.00	\$ 203.00	\$ 486.00
October	\$ 224.00	\$ 224.00	\$ 19.00	\$ 203.00	\$ 446.00
November	\$ 199.00	\$ 199.00	\$ -	\$ 203.00	\$ 402.00
December	\$ 175.00	\$ 175.00	\$ -	\$ 203.00	\$ 378.00
January	\$ 150.00	\$ 150.00	\$ -	\$ 203.00	\$ 353.00
February	\$ 124.00	\$ 124.00	\$ -	\$ 203.00	\$ 327.00
March	\$ 99.00	\$ 99.00	\$ -	\$ 203.00	\$ 302.00
April	\$ 74.00	\$ 74.00	\$ -	\$ 203.00	\$ 277.00
May	\$ 49.00	\$ 49.00	\$ -	\$ 96.00	\$ 145.00

* GBBR will pay a portion of the total amount due to MD State for Dues for 2019 and 2020 on your behalf.

*As a GBBR Affiliate member, you have the **option** of joining the Maryland REALTORS®. For a list of Maryland REALTORS® Affiliate Membership Benefits, call 800-638-6425.*

NEW ADDITIONAL AFFILIATE MEMBER DUES STRUCTURE -2020

June 1, 2019 to June 30, 2020

Month	GBBR Local Dues	Total	2019 MD State Dues*	2020 MD State Dues*	Total including Optional MD State Dues
June	\$ 50.00	\$ 50.00	\$ 65.00	\$ 203.00	\$ 318.00
July	\$ 50.00	\$ 50.00	\$ 65.00	\$ 203.00	\$ 318.00
August	\$ 46.00	\$ 46.00	\$ 49.00	\$ 203.00	\$ 298.00
September	\$ 42.00	\$ 42.00	\$ 34.00	\$ 203.00	\$ 279.00
October	\$ 38.00	\$ 38.00	\$ 19.00	\$ 203.00	\$ 260.00
November	\$ 34.00	\$ 34.00	\$ -	\$ 203.00	\$ 237.00
December	\$ 30.00	\$ 30.00	\$ -	\$ 203.00	\$ 233.00
January	\$ 26.00	\$ 26.00	\$ -	\$ 203.00	\$ 229.00
February	\$ 22.00	\$ 22.00	\$ -	\$ 203.00	\$ 225.00
March	\$ 18.00	\$ 18.00	\$ -	\$ 203.00	\$ 221.00
April	\$ 14.00	\$ 14.00	\$ -	\$ 203.00	\$ 217.00
May	\$ 10.00	\$ 10.00	\$ -	\$ 96.00	\$ 106.00

* GBBR will pay a portion of the total amount due to MD State for Dues for 2019 and 2020 on your behalf.

Dues amounts are subject to change.

2021 GBBR and Maryland REALTORS® dues will be invoiced in June and due on July 31, 2020.

***Primary Affiliate dues are \$299 (prorated monthly) for the first year and \$350 each year thereafter. Additional Affiliate membership is \$50 (prorated monthly) for the first year and \$50 each year thereafter.*

I hereby certify that the foregoing information furnished by me is true and correct, and I agree that failure to provide complete and accurate information as requested, or any misstatement of fact, shall be grounds for revocation of my membership if granted. I further agree that, if accepted for membership in the Association, I shall pay the fees and dues as from time to time established. **NOTE:** Payments to the Association of REALTORS® are not deductible as charitable contributions. Such payments may, however, be deductible as an ordinary and necessary business expense. Lobbying fees of \$5 are included in the GBBR dues, and 11% in the 2019 and 2020 MD state dues. These portions of your dues are non-deductible for tax purposes. NO REFUNDS.

By signing below, I consent that the REALTOR® Associations (local, state, national) and their subsidiaries, if any (e.g., MLS, Foundation) may contact me at the specified address, telephone numbers, fax numbers, email address or other means of communication available. This consent applies to changes in contact information that may be provided by me to the Association(s) in the future. This consent recognizes that certain state and federal laws may place limits on communications that I am waiving to receive all communications as part of my membership.

Dated: _____

Signature: _____

PAYMENT INFORMATION			
Total Payment Enclosed:			
Check or Credit Card Number:			
Card Holder's Name:			
Billing Address:			
Expiration Date:		Security Code:	