

New Member Application Women's Council of Realtors®



Please PRINT. Subject to approval by Membership Committee.

Name _____

Company Name _____

Mailing Address _____

City, State, Zip _____

Phone (mobile) _____ (office) _____

Email _____

Alternate email _____

Website _____

Who referred you? _____

Membership Type (select either Realtor®, Affiliate, or Student)

- Realtor® (real estate licensee) \$205 per year PMN Designee \$255

Member of which Realtor® Association? _____

NAR Member # _____ Designations _____

- Affiliate (vendor) \$205 per year

Names of the 2 new Realtor® members you are bringing in with you: _____

- Student (aspiring real estate licensee) FREE

College attending _____ GPA: _____

Major: _____ Anticipated Graduation Date: _____

Credit Card Payment of \$205 for annual dues

Circle Type: MC / Visa / Amex Exp. Date: _____ CVV Code: _____

Credit Card # _____

Name on Card _____

Billing Address _____

City, State, Zip _____

Phone # associated with this card _____

I hereby authorize Women's Council of Realtors® San Diego to charge my credit card.

Signature authorizing charges _____

(or make check payable to: Women's Council of Realtors® San Diego)

Email to membership@wcrsd.org - Your payment data will be kept confidential.

Questions? Contact Membership Director Carla Weichelt at (619) 890-7203

Note: Current members must renew on the www.wcr.org web site.