



**WCR LOCAL STRATEGIC PARTNER
NEW APPLICATION / RENEWAL NOTICE**

DATE: _____

LOCAL STRATEGIC PARTNER new and renewal membership dues for the year 2017 may be remitted by completing the following form. Please return this form with your check for \$90.00 made payable to WOMEN'S COUNCIL OF REALTORS. For your convenience, a paid receipt is provided at the bottom of this form.

NAME: _____

FIRM: _____

ADDRESS: _____

BUSINESS PHONE: _____ EXT: ____ FAX: _____

HOME/CELL PHONE: _____

EMAIL: _____

(Check One) New Membership _____ Renewal Membership _____

(Check One) Corporate Paid _____ Individual Paid _____

I AM INTERESTED IN SPONSORSHIP INFORMATION _____

Please mail this form with your check payable to Women's Council of Realtors, to:

WCR Dayton Chapter
P.O. Box 111
Dayton, OH 45401-01111

If you have any questions, please feel free to email wcrdayton@gmail.com

TEAR OFF FOR YOUR RECORDS

DATE: _____

PAID TO THE DAYTON CHAPTER OF WOMEN'S COUNCIL OF REALTORS
AMOUNT: \$90.00
RECEIVED BY: JANET MULCARE, 2017 TREASURER