

# 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) \$195 per year

Member of which Realtor® Association? \_\_\_\_\_

NAR Member # \_\_\_\_\_ Designations \_\_\_\_\_

- Affiliate (vendor) \$195 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 \$195 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](mailto:membership@wcrsd.org) - Your payment data will be kept confidential.

Questions? Contact Membership Director Jan Farley at (858) 699-7480

**Note: Current members must renew on the [www.wcr.org](http://www.wcr.org) web site.**