



**AFFILIATE
MEMBERSHIP**

***“IT PAYS TO
BELONG”***

**EAST POLK COUNTY
ASSOCIATION
OF
REALTORS, INC.**



**APPLICATION
for
AFFILIATE
MEMBERSHIP**

**700 Avenue B, SW
Winter Haven, FL 33880**

**Phone (863) 294-3163
Fax (863) 299-5772
Website: www.epcar.com**

**WHO CAN BECOME AN
AFFILIATE MEMBER OF THE
EAST POLK COUNTY
ASSOCIATION OF REALTORS?**

A business firm or individual who provides real estate related services or goods that benefit REALTORS®, their customers and clients.

**WHAT ARE SOME BENEFITS OF
AFFILIATE MEMBERSHIP ?**

- General Membership Meetings
- Social Activities
- Education Opportunities
- Committee representation
- Publications
- Special Community Programs
- Association Blood Bank
- Networking Opportunities
- Listed in our Internet Member Roster
- Sponsorships

Information distributed to over 550 REALTOR® and Affiliate Members through an internal distribution system.

Networking with real estate professionals and other real estate related business firms and individuals through involvement in association activities.

Social Activities include an Annual Golf Tournament, Bowling event, Awards and Christmas Programs and After Hours net-Working at local business establishments.

Access to leads and business prospects.

Your business name, address, phone number, website, plus representative name(s) and email address will be listed on the Affiliate Roster and included on our website.

**REALTORS®
and
AFFILIATE MEMBERS**

**“PARTNERS
FOR
SUCCESS”**

2010 FEES

~~_____ \$ 50.00~~ New Member Application Fee

~~_____ \$200.00
(January
March)~~

\$50.00 (JUNE thru DECEMBER)

Plus any ≈

_____ \$ 50.00 Additional Representative

(Fees are non-refundable/non-transferable)

**AFFILIATE
MEMBERSHIP
APPLICATION**

I hereby apply for Affiliate Membership in the East Polk County Association of REALTORS®. Enclosed is my check covering membership fees through the end of this calendar year.

Name of Business (Member)

Nature of Business

Website Address

Representative Name

Additional Representative Name (if any)

Street Address

Mailing Address if Different from Street Address

City Zip Code

Telephone # Cell #

E-mail: _____

Signature: _____

Date: _____