

## 2017 NON-REALTOR® MEMBERSHIP

**New Non-Realtor Membership**

**Renewal Non-Realtor Membership**

1. Which membership category you are applying for?

### NON-REALTOR® MEMBERSHIP CATEGORIES

A full description of our Non-REALTOR® membership categories and their benefits are available at [www.rcaoc.org](http://www.rcaoc.org)

**Trade Affiliate Membership:** A real estate owner, or other individual or company engaged in activities related to the real estate profession, who does not qualify for REALTOR® membership. Affiliate members have interests requiring information concerning real estate and sympathy with the objectives of the REALTORS® Commercial Alliance of Orange County.

**Education Membership:** An individual who is seeking additional education in real estate.

**Student Membership:** A student who is enrolled in an undergraduate or graduate degree program at an institution of higher education with a specialization or major in real estate, or who are seeking to obtain a real estate license or appraiser's license but who are not eligible for REALTOR® membership. Please attach a photocopy of your student ID with this application.

**Public Service Membership:** An individual who maintains an interest in the real estate profession as an employee or affiliate of an educational institution, public utility, government or other similar organization and is not engaged in the real estate profession on their own account or with an established real estate business.

### GENERAL INFORMATION

2. Name: \_\_\_\_\_  
(First) (Last)

3. E-Mail Address: \_\_\_\_\_

4. Cell Number: \_\_\_\_\_ Birth Date (M/D/Y): \_\_\_\_/\_\_\_\_/\_\_\_\_

5. Home Address: \_\_\_\_\_  
(Street or P.O. Box) (City) (State) (Zip Code)

6. Home Telephone Number: \_\_\_\_\_

7. **Trade Affiliate Membership Applicants:** Please describe how you or your company is engaged in activities related to the real estate profession: \_\_\_\_\_

Office Address: \_\_\_\_\_  
(Street) (City) (State) (Zip Code)

Office Number: \_\_\_\_\_ Website: \_\_\_\_\_

8. Which do you want as the primary mailing address?  Office  Home / P.O. Box

9. **Student Membership Applicants:** Are you currently enrolled in an undergraduate or graduate degree program?

No  Yes. If yes, which school are you enrolled in? \_\_\_\_\_

Are you seeking to obtain a real estate or appraiser's license?  No  Yes. If yes, when? \_\_\_\_\_

10. **Public Service Applicants:** Which education, public utility, governmental or similar organization do you belong?

\_\_\_\_\_ Are you an  employee or  affiliate?

**GENERAL TERMS AND CONDITIONS OF MEMBERSHIP**

1. **Bylaws, policies and rules.** I agree to abide by the Bylaws, policies and rules of the REALTORS® Commercial Alliance of Orange County, the Bylaws, policies and rules of the California Association of REALTORS®, and the constitution, Bylaws, policies and rules of the National Association of REALTORS®, all as may from time to time be amended.

2. **Orientation.** I understand that if the Board/Association requires orientation, I must attend such orientation prior to becoming a member of the Board/Association.

3. **No refund.** I understand that my Board/Association membership dues are non-refundable. In the event I fail to maintain eligibility for membership for any reason, I understand I will not be entitled to a refund of my dues or fees.

5. **Authorization to release and use information; waiver.** I authorize the Board/Association or its representatives to verify any information provided by me in this application by any method including contacting the California Department of Real Estate, my current or past responsible broker or designated REALTOR®, or any Board/Association where I held, or continue to hold, any type of membership. I further authorize any Board/Association where I held, continue to hold, any type of membership to release all my membership or disciplinary records to this Board/Association, including information regarding (i) all final findings of Code of Ethics violations or other membership duties within the past three (3) years; (ii) pending ethics complaints (or hearings); (iii) unsatisfied discipline pending; (iv) pending arbitration requests (or hearings); and (v) unpaid arbitration awards or unpaid financial obligations. I understand that any information gathered under this authorization may be used in evaluating my application for membership and future disciplinary sanctions. I waive any legal claim or cause of action against the Board/Association, its agents, employees or members including, but not limited to, slander, libel or defamation of character, that may arise from any action taken to verify, evaluate or process this application or other use of the information authorized and released hereunder.

6. By signing below, I expressly authorize the Board/Association, including the local, state and national, or their subsidiaries or representatives to fax, e-mail, telephone or send by U.S. mail to me, at the fax numbers, e-mail, telephones and addresses above, material advertising the availability of or quality of any property, goods or services offered, endorsed or promoted by the Board/Association.

| <b>SELECT YOUR 2017 MEMBERSHIP CATEGORY</b>  |                       |
|--|-----------------------|
| <input type="checkbox"/> <b>TRADE AFFILIATE</b>  | <b>Amount \$96.00</b> |
| <input type="checkbox"/> <b>EDUCATIONAL</b>  | <b>Amount \$96.00</b> |
| <input type="checkbox"/> <b>STUDENT</b>  | <b>Amount \$48.00</b> |
| <input type="checkbox"/> <b>PUBLIC SERVICE</b>   | <b>\$0</b>            |
| <b>Credit cards will incur an additional processing fee</b>  |                       |
| <b>Amount \$4.00</b>   |                       |
| Payment Information: (Note: Payments will not be processed unless application is complete and signed)  |                       |
| <ol style="list-style-type: none"><li>1. <u>Complete Application in full</u> – keep a copy for your records</li><li>2. Pay by <u>check</u> (preferred) or by credit card</li><li>3. You may bring payment and completed application to one of the monthly seminars (dues are not prorated)</li><li>4. Make check to <b>Realtor’s Commercial Alliance of Orange County or RCAOC</b><br/>Check # _____ If check is in a company name provide company name _____<br/>Mail To: <b>Realtor’s Commercial Alliance of Orange County</b><br/><b>P.O. Box 17921</b><br/><b>Anaheim CA 92817</b></li><li>5. If paying by <u>credit card</u> you may scan completed application &amp; email to : <a href="mailto:RCAOC.AE.Roxie@gmail.com">RCAOC.AE.Roxie@gmail.com</a></li></ol> |                       |
| Credit card # _____ CCV _____ Expiration date _____  |                       |
| Name on Card _____ Billing Zip _____ <input type="checkbox"/> Visa <input type="checkbox"/> MC <input type="checkbox"/> AMEX   |                       |
| Print Name _____ Signature _____ Date _____  |                       |
| <b>By signing:</b>   |                       |
| <b>1. You agree to information provided in 2017 Realtor application.</b>   |                       |
| <b>2. If using your credit card for payment you are authorizing RCAOC to charge your credit card \$96.00 +\$4.00 total \$100.00</b>  |                       |
| <b>Student rate \$48.00 +4.00 total \$52.00</b>  |                       |
| (All dues are non-refundable.)   |                       |
| <b><u>RCAOC THANKS YOU IN ADVANCE FOR YOUR MEMBERSHIP</u></b>  |                       |
| <b>May 2017 be a very successful year for you, best wishes for health and happiness.</b>   |                       |