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| --- | --- |
| **Affiliate Application Summary** | |
| **Please complete the following information and return with your application**  (This information will be used to notify NHAR of your membership with the WMBR) | |
| Application Date |  |
| **Company Name** |  |
| Last Name (of person responsible) |  |
| First Name & Initial |  |
| Nickname |  |
|  |  |
| Cell Phone |  |
|  |  |
| Office Mailing Address |  |
| City, State, ZIP |  |
| Office Physical Address |  |
| City, State, ZIP |  |
| Office Phone |  |
| Office Fax |  |
| Office E-Mail |  |
| Web Page |  |
|  |  |
| **Application Approved On** |  |
|  |  |
| **2019 Dues Summary** | |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Application Month** | **WMBR Application Fee** | **WMBR Dues**  ***Includes one company representative*** | **Total** | **+** | **WMBR Dues**  ***Additional Representatives*** | **NHAR Dues *Optional Membership*** |
| **January** | $150.00 | $200.00 | $350.00 | $50.00  *(per individual)* | $115.00  *(per individual)* |
| **February** | $150.00 | $183.33 | $333.33 |
| **March** | $150.00 | $166.66 | $316.66 |
| **April** | $150.00 | $149.99 | $299.99 |
| **May** | $150.00 | $133.32 | $283.32 |
| **June** | $150.00 | $116.65 | $266.65 |
| **July** | $150.00 | $99.98 | $249.98 |
| **August** | $150.00 | $83.31 | $233.31 |
| **September** | $150.00 | $66.64 | $216.64 |
| **October** | $150.00 | $49.97 | $199.97 |
| **November** | $150.00 | $33.30 | $183.30 |
| **December** | $150.00 | $16.63 | $166.63 |
| ***Acct #*** | ***411*** | ***421*** |  | ***421*** | ***241*** |
| **Total Paid: Check #: Date:** | | | | | | |