

National Association of Real Estate Brokers NAREB Region V (S.C. & N.C.) Membership Application

Date	20					
The undersigned hereby applies for admission as a member of the National Association of Real Estate Brokers, Inc. [®] and subscribes to the Code of Ethics and Constitution & ByLaws governing the same and agreeing to be subject to them as they now exist or as they may be hereafter amended.						
Applicant Name						
Company Name						
Business Address						
City/State/Zip						
Home Address						
Contact Number(s)	Real Estate Lic # State					
Email Address Work Email						
Website						
Real Estate Affiliation (check all that apply)						
Real Estate Broker	Real Estate Agent Loan Officer					
Appraiser	Inspector Other (Specify)					
Annual Membership Dues*: (Please check t	he appropriate Membership Category)					
\$225 *Individual Broker Member	\$185 *Associate Member (Sales)					
A licensed broker who is certified by the State.	A salesperson that holds a license under a Broker member of NAREB.					
\$195 *Allied Associate Member	\$230 *Allied Member					
A salesperson who holds a license under a non-membe	Individuals, associates, organizations, co-partnerships and of NAREB					

corporations engaged in business allied to real estate.

of NAREB.

* These mo	embership tier amounts	are in addition to w	hat you charge for your I	ocal board dues and	are subject to
General In	formation:				
What are y	your areas of specialization	on? Check all that ap	oply.		
Real	Estate Sales	Attorney	Appraisal	Insurance	
Insp	ection	Mortgage	Other, please spe	ecify	
•	ou expect from your NAI ad association to obtain r		se be specific. (May inclu	de social networking	, professional
What are y	our strengths that will b	e beneficial to your	NAREB chapter? Please	be specific.	
What is yo	ur highest level of educa	· 			
	Thank	you for your cons	ideration of a NAREB	Membership!	
	s of payment, whet Piedmont SC Assoc		dit card, or electro TIST.	nic are to be mo	nde payable to:
Please c to: GPSC	omplete this applica AR, P.O. Box 10183, Ro	tion form and s ock Hill, South Card	submit along with app olina, 29731; or electron	oropriate membe ically to: <u>nareb2022</u>	rship tier dues. @gmail.com.
	FOR OFFICE USE ON	_Y			
	Date Completed Applic	ation Received: _	سر المدر		
	Date Payment Receive	ed:	معم العمر		
	Method of Payment:	Check #	نسم النصر	or	
	Constit Const #				