## HIGHLAND LAKES ASSOCIATION OF REALTORS®, INC.

4601 Innovation Loop, Marble Falls, TX. 78654 Phone: 830-693-5787 Fax: 830-693-3845 www.HighlandLakesRealtors.com

## 2017 AFFILIATE MEMBERSHIP APPLICATION

NAME	OF APPL	ICANT: _										
NAME & Type of BUSINESS:												
MAILING/BILLING ADDRESS:												
CITY, S	STATE, Z	IP:										
BUSINI	ESS PHO	NE:				FAX: _						
EMAIL	:				WEBS	ITE:						
I am currently a member of Board of REALTORS®.												
I am <u>no</u>	<b>t</b> a license	ed real esta	te broker	or salesm	nan: (check	here)						
Recommended for membership by:												
The und	lersigned l	hereby ma	kes applic	ation for	Affiliate M	Membersh	ip in the	Highlan	d Lakes	Associat	ion of R	lealtors®.
Applicant's Signature					<u> </u>	_	Date					
\$157.00	per year	(TAR \$11°	7 + HLAo	oR \$40)	\$35 TRE	PAC Inve	stment	\$192.0	<b>0</b> w/ TR1	EPAC In	ivestmei	ıt
(Circle	One)				Prorate	ed fees bo	elow					
Jan. 192.00	Feb. 182.25	Mar. 172.50	April 162.75	May 153.00	June 143.25	July 133.50	Aug. 123.75	Sept. 114.00	Oct. 104.25	Nov. 94.50	Dec. 84.75	
New Ke	y Activati			tion Fee -	\$25 Applica + Prorated A <b>Fee</b> for ex	Annual Sei	rvice Fee	/ EKey \$5			- Monthl	y Service Fe
For Office Use Only:  TAR HLAoR TREPAC					Insp/Ap Coop Fe	_		Total Amount \$				

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Facsimile & E-Mail Consent Form
Pursuant to the FCC Rules Regarding Facsimile & E-Mail "Advertising".

As a Designated REALTOR®/Agent/Affiliate member, I/we hereby give Highland Lakes Association of REALTORS® the authority to send any "advertisement" related to information, programs, educational offerings, functions, etc. to my/our desk/firm by FAX or E-MAIL. This authorization shall remain in effect as long as my/our membership remains current with the Highland Lakes Association of REALTORS®. I/We understand I/we may remove my/our consent authorization at any time during my/our membership by making my/our request known to the Association in a signed, written notification.

Name of Applicant (Designated REALTOR®, R	EALTOR®, or Affiliate)
Name of Firm or Business	
Fax Number Requested To Be Used	
E-Mail Address Requested To Be Used	
Signature	Date