# Georgia Association of REALTORS®

# APPLICATION FOR GAR DIRECT / SECONDARY MEMBERSHIP

Please complete this application ONLY if you are currently a primary member of another State Association and wish to apply for SECONDARY Membership in the Georgia Association of REALTORS®.

PLEASE PRINT

NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(first) (m.i.) (last)

COMPANY NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

COMPANY ADDRESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CITY \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ STATE\_\_\_\_\_\_\_ ZIP \_\_\_\_\_\_\_\_\_\_\_\_\_\_

PHONE (\_\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ FAX (\_\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

EMAIL \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ NRDS#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Please contact your Local Assn. if you do not know)

LICENSE#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Which LOCAL REALTOR® Association do you currently hold membership in?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Which STATE REALTOR® Association do you currently hold membership in?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SIGNATURE DATE

**GAR SECONDARY DUES: $98.00 PER YEAR/PER MEMBER AND ARE PRO-RATED MONTHLY:**

JAN - $98.00 APRIL - $73.50 JULY - $49.00 OCT - $24.50

FEB - $89.93 MAY - $65.33 AUG - $40.83 NOV - $16.33

MAR - $81.67 JUNE - $57.17 SEPT - $32.67 DEC - $ 8.17

**Secondary Dues Payment Methods:**

**For Check Payments**: Make checks payable to Georgia Association of REALTORS®

Mailing Address: 6065 Barfield Drive, Sandy Springs, GA 30328

**For Credit Card Payments:** Fax form to 770.458.6992

**FOR QUESTIONS PLEASE CONTACT GAR AT 866.280.0576.**

**IMPORTANT:** Please remember membership is on an **individual** basis, not by company. The GAR Forms are strictly limited to GAR REALTOR® members only. Download and unauthorized use by the public and licensees who are NOT members of GAR is prohibited. Unauthorized use of any GAR Forms could result in legal action up to and including a copyright infringement lawsuit. GAR, its staff, and membership are not liable for any claims arising from such unauthorized use.

DATE RECEIVED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ AMOUNT PAID $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NAME ON CARD: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CREDIT CARD TYPE: \_\_\_\_VISA \_\_\_M/C \_\_\_\_AmEx

CREDIT CARD#:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CREDIT CARD SECURITY CODE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

EXPIRATION DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

BILLING ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street City State Zip