

## 2015 APPLICATION FOR ALLIED MEMBERSHIP

Allied Members shall be actively involved in the real estate transaction as primary service providers to a property transaction and shall be from Allied industries and professions. These Allied industries and professions are limited to: Attorneys, Bankers, Builder/Developers, Mortgage Brokers, and Title Companies. Membership is available only to individuals and is open only to individuals who are a sole proprietor, partner, or corporate officer of a company in the industry and/or profession specified or are licensed by the appropriate agency of the state of Florida for the industry and/or profession specified. Individuals from these industries and professions meeting the above criteria shall qualify for Allied Membership and shall not qualify for Allied Membership. Allied Members shall have the right to vote and to hold office as prescribed in NABOR's bylaws but may not use the term REALTOR®. Allied Members are not members of the Florida Association of REALTORS® or of the National Association of REALTORS®.

**NOTE: MEMBERSHIP IS BY INDIVIDUAL NOT COMPANY**

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**Section I - Personal Identification:**

\_\_\_\_\_ Member Number

1. Name: \_\_\_\_\_
2. Nickname: \_\_\_\_\_ Date of Birth: \_\_\_\_\_
3. Home Address: \_\_\_\_\_
4. City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_
5. Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_
6. Preferred Phone:  Company  Cell
7. Have you ever been a member of Naples Area Board of REALTORS? \_\_\_\_\_
8. What Company where you previously with \_\_\_\_\_

**Section II - Company Information:**

1. Company Name: \_\_\_\_\_
2. Address: \_\_\_\_\_
3. City: \_\_\_\_\_ State \_\_\_\_\_ Zip: \_\_\_\_\_  
Preferred Mailing Address:  Company  Home
4. Office Phone: \_\_\_\_\_ Office Fax #: \_\_\_\_\_
5. Cell Phone: \_\_\_\_\_ Title/Position: \_\_\_\_\_
6. E-Mail Address: \_\_\_\_\_
7. **Password:** What would you like to use as a Password: \_\_\_\_\_

**Section III - Type of Business**

- |   |   |  |  |
|---|---|--|--|
| <input type="checkbox"/> Accountant         | <input type="checkbox"/> Engineers            | <input type="checkbox"/> Interior Designer       | <input type="checkbox"/> Photographer          |
| <input type="checkbox"/> Advertiser         | <input type="checkbox"/> Floor Plan Service   | <input type="checkbox"/> Investment Company      | <input type="checkbox"/> Printing Company      |
| <input type="checkbox"/> Architect          | <input type="checkbox"/> Furniture Company    | <input type="checkbox"/> Land Use Planner        | <input type="checkbox"/> Prof. Financial Svcs. |
| <input type="checkbox"/> Communications     | <input type="checkbox"/> Graphic Designer     | <input type="checkbox"/> Landscaper              | <input type="checkbox"/> Publisher             |
| <input type="checkbox"/> Community Assoc    | <input type="checkbox"/> Home Inspection      | <input type="checkbox"/> Media                   | <input type="checkbox"/> Security              |
| <input type="checkbox"/> Computer Consult   | <input type="checkbox"/> Home Warranty        | <input type="checkbox"/> Moving Company          | <input type="checkbox"/> Supplier              |
| <input type="checkbox"/> Country Club       | <input type="checkbox"/> Hotel/Hospitality    | <input type="checkbox"/> Personal Financial Serv | <input type="checkbox"/> Surveyor              |
| <input type="checkbox"/> Educators          | <input type="checkbox"/> Insurance Company    | <input type="checkbox"/> Pest Control            | <input type="checkbox"/> Travel Agency         |
| <input type="checkbox"/> Pool Builder/Maint | <input type="checkbox"/> Home Repair & Maint. | <input type="checkbox"/> Client Gifts            |  |

**Section IV - Other Business:**

If you are a sole proprietor, partner, corporate officer or licensed in one of the industries below you must apply for Allied Membership.

- Banker   
  Builder/Developer   
  Mortgage Broker   
  Real Estate Attorney   
  Title Company  
 Other please describe: \_\_\_\_\_

Other Languages: \_\_\_\_\_

**Special Skills/Interests/Hobbies**

Please list areas in which you are interested and have the skills and experience to make a difference. Also, please include any relevant hobbies. Use functional areas, talents, and skills (e.g. artist, foreign language not noted above, singer, catering, community service, etc.) Areas of Interest: \_\_\_\_\_

**Section VI – Firm (Company) Services/Specialties: Used for the Internet Roster Search Engine on [www.naplesarea.com](http://www.naplesarea.com).**

- |   |   |  |  |
|---|---|--|--|
| <input type="checkbox"/> Mortgage Services    | <input type="checkbox"/> Home Inspections | <input type="checkbox"/> Pest Control    | <input type="checkbox"/> Photography       |
| <input type="checkbox"/> Banking Services     | <input type="checkbox"/> Interior Design  | <input type="checkbox"/> Insurance       | <input type="checkbox"/> Investments       |
| <input type="checkbox"/> Title Services       | <input type="checkbox"/> Furniture        | <input type="checkbox"/> Architecture    | <input type="checkbox"/> Hotel/Hospitality |
| <input type="checkbox"/> Real Estate Law      | <input type="checkbox"/> Landscaping      | <input type="checkbox"/> Engineering     | <input type="checkbox"/> Printing          |
| <input type="checkbox"/> Building/Development | <input type="checkbox"/> Home Warranty    | <input type="checkbox"/> Surveying       | <input type="checkbox"/> Community/Assoc.  |
| <input type="checkbox"/> Land Use Planning    | <input type="checkbox"/> Security Systems | <input type="checkbox"/> Moving Services | <input type="checkbox"/> Other             |

**Section VII - Affiliate Fees/Dues: (Pro-rated monthly)**

I submit with this application the full application fee and the pro-rated annual dues for the current fiscal year. Applicant understands and agrees that upon completion of the membership process the application fee and dues becomes the property of NABOR.

	January	February	March	April	May	June
Application Fee	210.00	210.00	210.00	210.00	210.00	210.00
NABOR Dues	157.00	143.92	130.83	117.75	104.67	91.58
<b>Total Due:</b>	<b>\$367.00</b>	<b>\$353.92</b>	<b>\$340.83</b>	<b>\$327.75</b>	<b>\$314.67</b>	<b>\$301.58</b>

	July	August	September	October	November	December
Application Fee	210.00	210.00	210.00	210.00	210.00	210.00
NABOR Dues	78.50	65.42	52.33	39.25	26.19	13.08
<b>Total Due:</b>	<b>\$288.50</b>	<b>\$275.42</b>	<b>\$262.33</b>	<b>\$249.25</b>	<b>\$236.19</b>	<b>\$223.08</b>

Please make checks payable to NABOR.     Company Check    or     Personal Check

Credit Card (Check One) :  Visa     Mastercard     Discover     American Express

Credit Card Number: \_\_\_\_\_ XD: \_\_\_\_\_

Name on Card: \_\_\_\_\_ Signature: \_\_\_\_\_

(If paying by Credit Card)

NOTE: Where a firm, partnership, or corporation initially pays the application fee and dues, the Membership(s) belongs to the entity, not to the individual(s), and the entity shall designate to NABOR the individual or individuals (if the entity pays for more than one individual) who will be the entity's Affiliate member(s).

I agree that, if accepted for Membership in NABOR, I shall pay the fees and dues from time to time established. I hereby certify that the foregoing information furnished by me is true and correct, and I agree that failure to provide complete and accurate information as requested, or if this application contains any misstatement of fact, upon submission of this application my membership will automatically terminate.

**Refund of application fees and/or Dues:**

I am submitting with this application the full application fee and the prorated annual dues for the current fiscal year. The application fee will not be refunded unless so ordered by the Board of Directors of NABOR. Regardless of how membership is terminated, NABOR will retain processing fee in the event the full application fee is not retained. AGREED AND ACCEPTED:

**SIGNED:** \_\_\_\_\_ **DATE:** \_\_\_\_\_  
(Applicant's usual form of signature)