

New Orleans Metropolitan Association of REALTORS®

3645 N. I-10 Service Road
Metairie, LA 70002-7000
Phone: 504/885-3200
Fax: 504-888-1812
www.nomar.org

Affiliate Membership Application

Name of Primary Affiliate: _____

Name of Secondary Affiliate: _____

Company Name: _____

Company Address: _____

Social Security #: _____

Type of Business: _____

Contact Phone: _____ Fax Phone: _____

E-Mail Address: _____

Company Web Site URL: _____

Would you like to serve on committees? Yes No

If you answered "yes" above, what are your interests?

Affiliate Dues

Type	Per Year	Per 1/2 Year
Primary	\$200.00	\$100.00
Secondary (Additional members)	\$ 50.00	\$ 25.00

Do you hold an active Real Estate license? _____No _____Yes If Yes, _____ Broker or _____ Agent)

If yes, Of what Board are you a member? _____

Signature _____ Title _____

Remittance Enclosed: \$ _____ Date: _____