



## Kent County Association of REALTORS®

519 S Red Haven Lane, Dover, DE 19901

Phone: (302) 678-9750

Web: [www.kcar.realtor](http://www.kcar.realtor) Email: [info@kcar.org](mailto:info@kcar.org)

### Application for Affiliate Team Members

Date: \_\_\_\_\_ Company: \_\_\_\_\_

The members of the Kent County Association of REALTORS® desire to establish relationships with individuals or firms who, while not engaged in real estate sales or real estate appraisal profession, have interests requiring information concerning real estate and are in sympathy with the objective of the Association. While Affiliate Members are not eligible to vote or hold elective office, they are encouraged to participate in special meetings and are eligible to use a variety of Association services conditioned upon Affiliate Member's full compliance with the Association's Bylaws, Rules & Regulations and Policies & Procedures.

Sentrilock User Fee: \$50

Team Member Name: \_\_\_\_\_

Type of business: i.e. home inspection, mortgage, etc. \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Office Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Cell: \_\_\_\_\_

Email Address: \_\_\_\_\_

Signature and Title of Applicant: \_\_\_\_\_



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### Credit Card Authorization Form

Cardholder Name: \_\_\_\_\_

Billing Address: \_\_\_\_\_

Card Type:  Visa  MasterCard  American Express  Discover

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

Expiration Date: \_\_\_\_/\_\_\_\_

CVV#: \_\_\_\_\_

Amount to be charged: \$ \_\_\_\_\_

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I authorize Kent County Association of REALTORS® to charge the agreed amount as stated above to my credit card provided herein. I agree that I will pay for this purchase in accordance with the issuing bank cardholder agreement.

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_