



SEDONA VERDE VALLEY ASSOCIATION OF REALTORS®

859 Cove Parkway, Suite 102
Cottonwood, Arizona 86326

PHONE: 928.282-5409
FAX: 928.282.3559

Office Use Only
Member ID# _____
Office ID# _____

Affiliate Mission Statement: "To provide support to REALTORS® and Affiliate Members who promote development and growth of our businesses and communities"

AFFILIATE MEMBER APPLICATION

Date: _____

Individual Name _____ Company/Business _____

Home Address _____ City _____ State _____ Zip _____

Physical Address _____ City _____ State _____ Zip _____

Company Mailing Address _____ City _____ State _____ Zip _____

Work Telephone Number _____ Fax Number _____ Cell Phone _____

Primary phone (Preferred phone# for agents and customers to contact you): _____ CELL _____ WORK

E-Mail Address (must fill in to receive information) _____ Website _____

Type of Business _____

How will your Affiliate membership complement the Real Estate profession? _____

Referred By

Are you currently a REALTOR® member of SVVAR? YES NO

Office Category (Check one):

<input type="checkbox"/> Accounting/Tax Preparation	<input type="checkbox"/> Insurance	<input type="checkbox"/> Newspapers
<input type="checkbox"/> Appraisers	<input type="checkbox"/> Interior Design & Décor	<input type="checkbox"/> Photographers
<input type="checkbox"/> Appliance Repair	<input type="checkbox"/> Investments	<input type="checkbox"/> Real Estate Schools
<input type="checkbox"/> Auctioneer	<input type="checkbox"/> Land Surveyors	<input type="checkbox"/> Remodeling
<input type="checkbox"/> Cleaning Services	<input type="checkbox"/> Landscaping	<input type="checkbox"/> Restaurants
<input type="checkbox"/> Computer	<input type="checkbox"/> Locksmith	<input type="checkbox"/> Services
<input type="checkbox"/> Construction	<input type="checkbox"/> Magazines	<input type="checkbox"/> Title Companies
<input type="checkbox"/> Exterminators & Pest Control	<input type="checkbox"/> Maintenance/Repair	<input type="checkbox"/> Virtual Tour Companies
<input type="checkbox"/> Home Inspections	<input type="checkbox"/> Mortgage Lenders	<input type="checkbox"/> Other (Please specify on line below)
<input type="checkbox"/> Home Warranty	<input type="checkbox"/> Moving Companies	

Other _____

Individual Dues \$ 125.00 per year (\$62.50 after June 30th). Your check must accompany the application. Affiliate members will have their name, company name, contact telephone and fax numbers, etc, published in the SVVAR roster and on www.svvar.com. By signing this application, you agree to abide by the SVVAR Bylaws and SVVAR Policy Statements.

Authorized Signature _____ Date _____
Submit completed form to: SVVAR, 859 Cove Pkwy, Cottonwood, AZ 86326 or Info@svvar.com