

Beaver County Association of REALTORS®

650 Corporation Street, Suite 401
Beaver, PA 15009

Phone: (724) 774-4126
Fax: (724) 774-1984

APPLICATION FOR MEMBERSHIP

Applicant's Name _____

Home Address _____

City, State, Zip _____

Home Phone _____ Office Phone _____

Agency _____

Agency Address _____

City, State, Zip _____

Real Estate License# _____

Email Address _____

I hereby apply for membership in the Beaver County Association of REALTORS®, enclosing a check in the amount of \$_____. I agree to abide by the Code of Ethics of the National Association of REALTORS® and the Constitution, Bylaws and Rules and Regulations of the Beaver County Association of REALTORS®.

I further agree to satisfactorily complete a reasonable and non-discriminatory New Member Orientation Program on such Code, Constitution, Bylaws, and Rules and Regulations within my first year of membership.

I understand that dues payments to B.C.A.R. are not tax deductible as charitable contributions; however, portions of such payments may be tax deductible as ordinary and necessary business expenses.

**A COPY OF YOUR REAL ESTATE LICENSE MUST ACCOMPANY
THIS APPLICATION.**

Applicant's Signature

Date

