



REALTOR®

**CLINTON COUNTY BOARD OF REALTORS®  
APPLICATION FOR AFFILIATE  
MEMBERSHIP**

Organization Name: \_\_\_\_\_

Primary Point of Contact: \_\_\_\_\_

Office Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Fax: \_\_\_\_\_

Do you or anyone in your firm hold a current real estate license?    Yes            No

Are you or your firm affiliated with another real estate Board/Council of REALTORS®?    Yes            No

If so, please provide the name of the Board/Council and type of membership held: \_\_\_\_\_

If you are now or ever have been a REALTOR®, please indicate your NAR membership #: \_\_\_\_\_

I hereby certify that the foregoing information furnished is true and correct. I agree that failure to provide complete and accurate information as requested, or any misstatement of fact, shall be grounds for revocation of membership. Annual fee amount is \$300.00(prorated on a quarterly basis at time of application). Please make check payable to the Clinton County Board of REALTORS® or CCBR.

**Signature:** \_\_\_\_\_ **Dated:** \_\_\_\_\_

Fax or mail to: Clinton County Board of REALTORS®  
25 Margaret Street, Suite 2  
Plattsburgh, NY 12901  
Phone: (518) 561-8777; Fax: (518) 561-0107  
E-mail: admin@acvmls.com

Note: Payments to the Clinton County Board of REALTORS® are not deductible as charitable contributions. Such payments may, however, be deductible as an ordinary and necessary business expense.