



RAM AFFILIATE MEMBER APPLICATION

(for New or Reactivating Affiliate Offices and Affiliate Members)

1. COMPLETE THIS SECTION:

Name of Affiliate Office _____ **Date** _____

Type of business (check one):

- | | | | | |
|--|---|---|---|--|
| <input type="checkbox"/> Accounting Services | <input type="checkbox"/> Architect | <input type="checkbox"/> Attorneys/Legal Services | <input type="checkbox"/> Carpet Cleaners | <input type="checkbox"/> Computer Services |
| <input type="checkbox"/> Developers | <input type="checkbox"/> 1031 Exchange | <input type="checkbox"/> Financial Services | <input type="checkbox"/> Handy Man | <input type="checkbox"/> Hawaii News/Advertising |
| <input type="checkbox"/> Home Inspection Service | <input type="checkbox"/> Home Staging | <input type="checkbox"/> Insurance Company | <input type="checkbox"/> Interior Decorating | <input type="checkbox"/> Landscape |
| <input type="checkbox"/> Land Surveyor | <input type="checkbox"/> Lenders/Mortgage Co. | <input type="checkbox"/> Manufactured Housing Wholesale | <input type="checkbox"/> Termite/Pest Control | <input type="checkbox"/> Photography |
| <input type="checkbox"/> Real Estate Magazines | <input type="checkbox"/> Real Estate School | <input type="checkbox"/> Specialty Items | <input type="checkbox"/> Solar | <input type="checkbox"/> Title & Escrow Services |
| <input type="checkbox"/> Vacation Rentals | <input type="checkbox"/> Video Production | <input type="checkbox"/> Virtual Tours | <input type="checkbox"/> Other _____ | |

Mailing address _____

Street address _____

Office Phone # _____ **Office Fax #** _____

Cell # _____ Okay to Publish Do not publish

Person Representing Affiliate Office (your name) _____

Last 4 digits of Social Security Number _____ **Web** _____

E-mail Address (must provide) _____

There are several options available for companies wanting to join the REALTORS® Association of Maui, Inc., or RAM, as an Affiliate member. If your company has more than one office as a member, the first office that joins will be considered the primary office. Additional offices/branches that join after the primary office, and additional members working for a company that has already joined, are given reduced membership rates.

As an Affiliate member of the REALTORS® Association of Maui, you will be listed on RAM's website (www.RAMaui.com) and your company will be posted in our Member and Office Rosters. You will be able to attend the monthly Regional meetings/Caravans (check the RAM calendar for location and time). You will be recognized, along with other Affiliate members, as a supporter of RAM. Your membership also entitles you and members of your office to member prices for RAM membership labels and seminars. Off-market statistics are available on RAM's website, and in hard copy, upon request.

2. INDICATE THE TYPE OF MEMBERSHIP PREFERRED:

RAM (annual dues are prorated quarterly*):	<input type="checkbox"/> Oct-Dec	<input type="checkbox"/> Jan-Mar	<input type="checkbox"/> Apr-June	<input type="checkbox"/> July-Sept
<input type="checkbox"/> Primary Office:	\$125.00	\$100.00	\$75.00	\$50.00
<input type="checkbox"/> Additional Member/ Branch Office:	75.00	60.00	45.00	30.00

3. INDICATE TYPE OF PAYMENT

Amount paid \$ _____ Check # _____ Cash AmerEx Master VISA

FAX CHARGES TO (808) 871-8911: CREDIT CARD # _____

Name as it appears on credit card _____ **Exp. date** _____

4. RETURN FORM & PAYMENT TO RAM

Please contact your Affiliates' Liaison Committee Chairperson if you would like information presented on your behalf at one of our Board of Directors' Meeting. If you have any questions, call RAM at 873-8585.

RAM USE ONLY:	<input type="checkbox"/> RAM	<input type="checkbox"/> RAM	ASSIGN OFFICE ID#: _____
Entered in MMSI: _____	Add to RAM Website: _____	Payment Collected: _____	Processed Credit Card: _____
<small>date</small>	<small>date</small>	<small>date</small>	<small>date</small>