

# GRAND JUNCTION AREA REALTOR® ASSOCIATION



## Affiliate Business Council

Application for Membership: We are excited to consider your membership in our organization! Applications are subject to ABC and BOD approval and will only be considered upon receipt of fully completed application and payment of fees in full. Upon acceptance, submit both vector files and high resolution jpg/png files of logo within 30 days to: [kylee@gjrealtors.org](mailto:kylee@gjrealtors.org). Any changes to name, logo, contact information, individual members etc, is the responsibility of the business to notify GJARA.

Business Name: \_\_\_\_\_

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

Business Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Business Email: \_\_\_\_\_

Business Website: \_\_\_\_\_

Type of Business (choose one only):

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Lender                | <input type="checkbox"/> Education Provider   | <input type="checkbox"/> Mover                     |
| <input type="checkbox"/> Title/Closing Company | <input type="checkbox"/> Painter              | <input type="checkbox"/> Staging                   |
| <input type="checkbox"/> Home Inspector        | <input type="checkbox"/> Insurance (P&C only) | <input type="checkbox"/> Photographer/Videographer |
| <input type="checkbox"/> Other _____           |   |  |

Licensed trade (specify): \_\_\_\_\_

Unlicensed trade (specify): \_\_\_\_\_

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

Primary Point of Contact Email (if different than above): \_\_\_\_\_

Primary Point of Contact direct number: \_\_\_\_\_

***(For Office Use Only)***

Date Received \_\_\_\_\_ Amount Paid \$ \_\_\_\_\_  
ABC approval date: \_\_\_\_\_ BOD approval date: \_\_\_\_\_  
NRDS # \_\_\_\_\_

