



**EMERALD COAST  
ASSOCIATION OF REALTORS®**



10 Hollywood Blvd. S.E., Fort Walton Beach, FL 32548 • Phone: 850.243.6145 • info@ecaor.com

**Application for Power Partner Membership**

Power Partner Membership of the Emerald Coast Association of Realtors® (ECAR) is for those companies which complement the real estate industry such as lenders, title companies, pest control professionals, home inspectors, attorneys, and any other businesses that would benefit from association membership.

ECAR Power Partner members are eligible and can benefit from networking with our Realtors®, receive a free subscription to The ECAR Buzz (an e-newsletter for members), access to events, products and services, and opportunities to advertise and sponsor. Power Partners will be listed on our Power Partner Directory located on ECAR’s website [www.EmeraldCoastRealtors.com](http://www.EmeraldCoastRealtors.com), and have the opportunity to participate in community service events and on ECAR committees. To get the most out of your membership, you are encouraged to participate in ECAR meetings, Educational Courses, Membership Orientations, and other special functions.

ECAR Power Partner Member Annual Dues are \$250 per year, pro-rated monthly. The Power Partner Dues proration covers the company and the primary contact. Any additional contacts added to your company will be an additional \$50 per contact\*. Each representative is listed on our website, [EmeraldCoastRealtors.com](http://EmeraldCoastRealtors.com). Per our bylaws: Power Partner members shall be individuals, partnerships, corporations, or associations who are engaged in a business other than the sale of real estate which does not require a real estate license, but who have interests that benefit from the services of the Association and who are in agreement with the objectives of the Association. Membership conveys to the business entity, not an individual member of the business.

- 1) Business Name: \_\_\_\_\_
- 2) Business Street Address: \_\_\_\_\_
- 3) Business City/State/ZIP: \_\_\_\_\_
- 4) Additional Branches: \_\_\_\_\_
- 5) Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_
- 4) Primary Contact Name: \_\_\_\_\_
- 5) Primary Contact Email: \_\_\_\_\_
- 6) Phone/Cell: \_\_\_\_\_ Fax: \_\_\_\_\_
- 7) Website: \_\_\_\_\_
- 8) Additional Representative 1 (\$50)\*: \_\_\_\_\_  
 Email: \_\_\_\_\_ Cell: \_\_\_\_\_
- 9) Additional Representative 2 (\$50)\*: \_\_\_\_\_  
 Email: \_\_\_\_\_ Cell: \_\_\_\_\_
- 10) Type of Business for listing on the ECAR website:
 

<input type="radio"/> Accountant	<input type="radio"/> Construction	<input type="radio"/> Lender	<input type="radio"/> Pest Control
<input type="radio"/> Marketing	<input type="radio"/> Home Inspection	<input type="radio"/> Newspaper	<input type="radio"/> Title Services
<input type="radio"/> Attorney	<input type="radio"/> Insurance	<input type="radio"/> Home Stager	<input type="radio"/> Catering
<input type="radio"/> Other _____			
- 11) Personal Name: \_\_\_\_\_
- 12) Personal Street Address: \_\_\_\_\_
- 13) Personal City/State/ZIP: \_\_\_\_\_
- 14) Personal Phone: \_\_\_\_\_ Cell: \_\_\_\_\_
- 15) Company Tax ID: \_\_\_\_\_
- 16) Referred By: \_\_\_\_\_

***(Please include a business card with your returned application.)***

I understand that by providing my mailing address, e-mail address, phone and fax numbers, I consent to receive communications from the Emerald Coast Association of Realtors®.

- Personal Contact Information
- Business Contact Information

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

## Membership Agreement

I agree that, if accepted for membership in this Association, I shall pay the dues as from time to time established. I hereby certify that the foregoing information furnished by me is true and correct, and I agree that failure to provide complete and accurate information as requested, or any misstatement of fact, may be grounds for revocation of my membership, if granted. I fully understand that the Membership dues are paid for the office and not myself as an individual. Should I leave the office I have registered, I understand that the membership dues paid remain with that office and that Membership dues are non-refundable. I understand that if I am terminated for non-payment of dues or non-payment on account, I will be required to pay the dues/fees, penalties (if any), and balance on account (if any) to reinstate my membership. If dues and other financial obligations to the Association are not paid within the allotted time, I understand that my account may be subject to collections.

By signing below, I have read, understand and agree to the terms above.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

## Payment Information

	<b>January</b>	<b>February</b>	<b>March</b>	<b>April</b>	<b>May</b>	<b>June</b>
<b>Power Partner</b>	\$250.00	\$229.17	\$208.34	\$187.51	\$166.68	\$145.85
<b>Dues Proration</b>	<b>July</b>	<b>August</b>	<b>September</b>	<b>October</b>	<b>November</b>	<b>December</b>
	\$125.02	\$104.19	\$83.36	\$62.53	\$41.70	\$20.87

- Check Made Payable to ECAR is enclosed.
- Please charge my MC/VISA/Discover/AMEX\*, CC#: \_\_\_\_\_

\*CC users: In order to process your CC you must provide your billing street address and zip code.

Applicant Name (printed): \_\_\_\_\_

Billing Street Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_

CC Exp. Date: \_\_\_\_\_ Security Code: \_\_\_\_\_ Signature: \_\_\_\_\_

If you are paying by credit card, you may email [pearlieb@ecaor.com](mailto:pearlieb@ecaor.com), fax the completed form to 850-275-1073, or mail the completed form with payment to: ECAR, 10 Hollywood Blvd. SE, Fort Walton Beach, FL 32548. For credit card information or if you have any questions, please call Emerald Coast Association of Realtors® at 850-243-6145.