



AFFILIATE APPLICATION FOR MEMBERSHIP  
 CONEJO SIMI MOORPARK ASSOCIATION OF REALTORS®, INC.  
 463 PENNSFIELD PLACE SUITE 100  
 THOUSAND OAKS, CALIFORNIA 91360-5571

I hereby apply for Affiliate membership to the  
 CONEJO SIMI MOORPARK Association OF REALTORS®, INC.

Enclosing my check for fees in the amount of \$\_\_\_\_\_, which amount is to be returned to me in the event of non-approval. I irrevocably waive all claims against the Association of any of its officers, directors or members for any act in connection with the business of the Conejo Simi Moorpark Association of REALTORS® and particularly as to its or their acts in electing or failure to elect, advancing, suspending, expelling, or otherwise disciplining me as a member. Upon the expiration of said membership for any cause, I will return to the Conejo Simi Moorpark Association of REALTORS® all certificates, signs, seals or other indications of membership in the Conejo Simi Moorpark Association of REALTORS® and the California Association of Realtors®.

(Please Print or Type)

Name:		Firm Name:		
Email:	Phone Number:	Office Phone#:		
Business Address:				
		City	State	Zip
Website:	NMLS# (If Applicable):	Title or Position:		

I **do not** have an **Active** California Real Estate License. Please Initial Here \_\_\_\_\_

If you would like to become a member of C.A.R.®, I agree to pay the established fees as long as I remain a member of this Association and understand that present fees are prorated for each calendar month:

Affiliate Membership dues \$\_\_\_\_\_ plus C.A.R.® Dues \$\_\_\_\_\_

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

Please return with payment to: **CSMAR** - By Email: to Carla Mizell [Carlam@csmaor.com](mailto:Carlam@csmaor.com) or By Fax: (805) 620-7700