



2009/2010 Application For Membership

Name: _____

Company: _____ Phone: _____

Fax: _____ E-mail: _____

Company Address: _____

City: _____ State: _____ Zip: _____

Home Address: _____ Home Phone: _____

City: _____ State: _____ Zip: _____

Preferred contact: Home or Office

Colorado Real Estate License #: _____

DMCAB Membership: Individual Licensee Membership \$149

1.) Are you now a member of any other real estate Board or Association? Yes No

If yes, provide name of the other Board or Association: _____

2.) Have you ever held membership in DMCAR or any other real estate Board? Yes No

If yes, provide name of the Board or Association: _____

3.) Member from (date): _____ to (date): _____

4.) City: _____ State and Zip: _____

5.) Are you presently financially indebted to any former Board or Association? Yes No

If yes, please explain: _____

BY SIGNING BELOW, I hereby apply for Membership in the Denver Metropolitan Commercial Association of Brokers (DMCAB), I have included my payment to cover the application fee plus annual dues. In the event my application is approved I hereby agree to abide by the DMCAB Bylaws.

I, the undersigned, agree to pay the established fees as long as I remain a member of the Denver Metropolitan Commercial Association of Brokers. I understand that if I fail to meet the requirements of membership, my application fee and prorated annual dues will be forfeited.

Membership Fee: (Annual dues total from above.) \$ _____

Application Fee: \$75

(Check one. No fee for active DMCAR members to transfer to DMCAB.)

Responsible Broker or Appraiser

Broker or Appraiser Associate \$ _____

TOTAL \$ _____

Credit Card Payment Information:

Visa MC AMEX Discover

Card #: _____ - _____ - _____ - _____

Expiration date: (month) _____ (year) _____

Signature: _____

I have read and understand the requirements of membership. 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.

Signed: _____

Date: _____