



2026

St. Charles REALTORS®

Affiliate/Affiliate-Associate Membership Application

Return to: Membership@StCharlesREALTORS.com or fax to: 636-946-2621

New Membership \_\_\_ Status Change \_\_\_

On behalf of \_\_\_\_\_ I/we hereby apply for: (circle one)
(company, organization or individual)

Affiliate/Affiliate-Associate membership in the St. Charles REALTORS® (hereafter the "Association"). I/we hereby apply for membership in the Association and agree to abide by its Bylaws, Policy Manual, and the REALTOR® Code of Ethics. I consent that the Association may invite and receive information and comment about me or the company I represent from any member or other person, and I further represent and agree that any information and comment furnished to the Association as a result of this inquiry may be used to make a determination regarding this membership application and will be regarded as both privileged and confidential. I further irrevocably waive all claims against the Association particularly regarding acts in electing or failure to elect, advancing, suspending, expelling or otherwise disciplining me or the company I represent as an applicant, or as a member. I further authorize the Association to reasonably distribute my contact information. In addition, I specifically authorize the Association, the Missouri REALTORS® (MR) and the National Association of REALTORS® (NAR) to communicate with me at the addresses given or future addresses used in the course of business via U.S. Mail, email, telephone, phone text, and facsimile. I understand that money owed to the Association by me or the company I represent that is not paid within 30 days of the due date is subject to a \$5 or 1.5% late fee, whichever is greater, accrued monthly.

Name \_\_\_\_\_ Cell Phone \_\_\_\_\_

Home Address \_\_\_\_\_ Birth Date: \_\_\_\_ - \_\_\_\_ - \_\_\_\_
street city state Zip Code

E-mail \_\_\_\_\_ Military Service \_\_\_\_\_

Company Name \_\_\_\_\_ Office Phone \_\_\_\_\_

Address \_\_\_\_\_
street city state Zip Code

Do you hold a Real Estate License?  Yes  No Do you hold an Appraiser's Certificate?  Yes  No

Prior to this application, have you or the company you represent ever been a member of a REALTOR® Association?  Yes  No
If yes, Association name \_\_\_\_\_ Membership date \_\_\_\_\_

Have you or the company you represent ever been disciplined by the Missouri Real Estate Commission or any REALTOR® Association?  Yes  No
If yes, please attach a separate sheet explaining the nature of the discipline.

Have you ever been expelled from, or denied membership in a real estate association?  Yes  No If yes, please attach a separate sheet explaining.

Please indicate your primary and your secondary business subclass for our searchable member Directory by marking those with #1 and #2:
\_\_\_ Appraisal
\_\_\_ Home Inspector
\_\_\_ Homeowner Insurance
\_\_\_ Homeowner Warranty Sales
\_\_\_ Home Repair Contractor or Supplier
\_\_\_ Mortgage Banker or Broker
\_\_\_ Surveyor
\_\_\_ Termite Inspector
\_\_\_ Title Insurance Agent or Rep
\_\_\_ Other \_\_\_\_\_

Enclosed is \$100.00 Application Processing Fee (non-refundable) and \$\_\_\_\_\_ Dues (see reverse for proration schedule) for the calendar year that ends December 31, for a total of \$\_\_\_\_\_.

Applicant's Signature \_\_\_\_\_

Date \_\_\_\_\_

**DUES ARE NOT REFUNDABLE**

**PAYMENT OPTION** – Check box and sign below: I hereby authorize the Association to keep my credit card information on my record and to charge today's fees to this card. The Association will not use this card without advance authorization from you in the future. I understand that it is my responsibility to notify the Association of any change to my charge card (i.e., expiration date, etc.).

Card No: \_\_\_\_\_ Exp: \_\_\_\_\_ CVV Code: \_\_\_\_\_

Signature: \_\_\_\_\_ Billing Zip Code: \_\_\_\_\_

**Membership Dues**

Dues Proration  
per month:      Jan      Feb      Mar      Apr      May      Jun      Jul      Aug      Sep      Oct      Nov      Dec

**Affiliate Member** (applies to main contact)

Local Association	225.00	206.25	187.50	168.75	150.00	131.25	112.50	93.75	75.00	56.25	37.50	18.75
Application Fee	<u>100.00</u>	<u>100.00</u>	<u>100.00</u>	<u>100.00</u>	<u>100.00</u>	<u>100.00</u>	<u>100.00</u>	<u>100.00</u>	<u>100.00</u>	<u>100.00</u>	<u>100.00</u>	<u>100.00</u>
<b>Total</b>	<b>325.00</b>	<b>306.25</b>	<b>287.50</b>	<b>268.75</b>	<b>250.00</b>	<b>231.25</b>	<b>212.50</b>	<b>193.75</b>	<b>175.00</b>	<b>156.25</b>	<b>137.50</b>	<b>118.75</b>

**Affiliate-Associate Member** (applies to second and subsequent members from same office; no application fee charged)

Local Association	79.00	79.00	79.00	79.00	79.00	79.00	79.00	79.00	79.00	79.00	79.00	79.00
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Dues payments to the St. Charles REALTORS® are not tax deductible as charitable contributions. Portions of such payments may be tax deductible as ordinary and necessary business expenses.