



# AFFILIATE MEMBERSHIP APPLICATION

405 E. Congress Parkway, Suite A  
Crystal Lake, IL 60014  
815-459-0600  
[info@HeartlandRO.com](mailto:info@HeartlandRO.com)

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

License #: \_\_\_\_\_

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

Business Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Business Type: \_\_\_\_\_ Position with firm: \_\_\_\_\_

Office Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Which phone # do you want to appear on Heartland’s website (*check one*): \_\_\_ Office \_\_\_ Cell

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

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

Is Applicant (or firm) actively engaged in the real estate profession, and/or licensed as a real estate broker or salesperson In the State of Illinois? \_\_\_ Yes \_\_\_ No *If you answered yes to the above, please complete the following that applies:*

Real Estate License #: \_\_\_\_\_ Real Estate License held at: \_\_\_\_\_

Appraiser License #: \_\_\_\_\_ Home Inspector License #: \_\_\_\_\_

Mortgage NMLS #: \_\_\_\_\_ Other Applicable License #: \_\_\_\_\_

Are you also applying for membership with Illinois REALTORS®? \_\_\_ Yes \_\_\_ No (*Optional - See fees below*)

Have you paid the Illinois REALTORS® portion of the dues through any other Board/Association? \_\_\_ Yes \_\_\_ No  
(*If yes, please attach dues waiver from primary Board/Association*)

**PLEASE PROVIDE A COPY OF YOUR LICENSE OR CERTIFICATION WITH APPLICATION SUBMISSION.**

Applicant hereby agrees to abide by the Bylaws of the Heartland REALTOR® Organization and waives all claims against the Association and the members of the Professional Standards Committee arising out of any action by the Committee or the Association.

By signing below, I consent that the REALTOR® Associations (local, state, and national) and their subsidiaries, if any (e.g., MLS, Foundation) may contact me at the specified address, telephone numbers, fax numbers, email address, or other means of communication available. This consent applies to changes in contact information that may be provided by me to the Association(s) in the future. This consent recognizes that certain state and federal laws may place limits on communications that I am waiving to receive all communications as part of my membership.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

Referred by (*if applicable*): \_\_\_\_\_

Are you interested in joining the REALTOR® Resource Committee – Heartland’s Affiliate Committee? \_\_\_ Yes \_\_\_ No

Are you interested in learning about our Premier Affiliate program? \_\_\_ Yes \_\_\_ No

**AFFILIATE DUES**

**APPLICATION FEE:** \$75.00 (*Non-refundable if accepted to membership*)

<b>DUES PRORATED BY QUARTER</b>	<b>Local</b>	<b>State (optional)</b>
January/February/March	\$200.00	\$35.00
April/May/June	\$150.00	\$26.25
July/August/September	\$100.00	\$17.50
October/November/December	\$ 50.00	\$ 8.75

**PLEASE NOTE:** Application fee and dues must be submitted with the application; however, if applicant's firm has already paid one application fee, application fee is waived. **Application can be emailed to [info@HeartlandRO.com](mailto:info@HeartlandRO.com).**