

**Michigan REALTORS® Association
Executive Council (MRAEC)
Membership Application**

Date: _____

Applicant's Name: _____

Applicant's Email Address: _____

Association/Board's Name: _____

Association's Web Site: _____

Address: _____

City/State/Zip Code + 4: _____

Office Phone: () _____ Office Fax: () _____

I hereby apply for membership in the above named council, and enclose my check in the amount of \$ _____, per the below pro-rated chart.
(Payable to: MRAEC)

Apply during: Jan 1st thru Mar 31st = \$65.00

Apr 1st thru Jun 30th = \$48.75

Jul 1st thru Sep 30th = \$32.50

Oct 1st thru Dec 31st = \$16.25

Please remit application with appropriate payment to the:
Michigan REALTOR® Association Executive Council (MRAEC)
c/o MAR
Kathie Feldpausch
P.O. Box 40725
Lansing, MI 48901-7925