



LOCAL  
ACCURATE  
TRUSTED

## Emeritus Application

Applicant Name :

### \*Company Information

Company Name:

Office address:

City:

State:

ZIP Code:

Phone:

Fax:

### \*Applicant Information

Date of Birth:

NRDS#

Phone:

MD License #:

Cell Phone:

When did you receive your Real Estate license?

What was the name of the first Board/Association you joined?

What year did you join the above Board/Association?

When did you first join the Coastal Association of REALTORS®?

Have you served on any National Assoc. of REALTORS® or Political committees?  Yes  No

\*\*\*If yes, please list each committee and the year(s) you served.

By signing below, I certify that I have paid National Association of REALTORS® dues for 40 years consecutively.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Supporting you today and helping you prepare for tomorrow.

Phone: **410-641-4409**

[www.coastalrealtors.org](http://www.coastalrealtors.org)