



## 2018 Application for Life Membership

The Membership Committee shall consider all requests for Life Membership for any REALTOR® who qualifies and make recommendations on such applicants to the Board of Directors for their approval. All applications must be received no later than February 13, 2018 in order to be processed and approved for announcement at the Awards Ceremony. In addition to this special recognition, Life Members receive free REALTORS® Association of Central Massachusetts Membership (starting in the fiscal year following their designation) for as long as they are REALTOR® Members of the Association.

**Qualifications:** To be considered for life membership individuals must:

- Hold a current real estate salesperson’s or broker’s license in the Commonwealth of Massachusetts;
- Have a minimum of 30 years of continuous membership in good standing in the REALTORS® Association of Central Massachusetts.
- Have reached the age of 65: **Please attach a copy of driver’s license, passport or state ID to document your age. Your application will not be reviewed without a readable copy of your driver’s license or other approved documentation of age.**
- Complete and submit the application;
- Include one (1) letter of recommendation from a member in good standing, other than the applicant;
- Be able to demonstrate at least 10 years of volunteer service to WRAR. Documented volunteer service shall be defined as:

1. Participation as a WRAR officer, director or member of a WRAR committee, task force, Presidential Advisory group (PAG), and/or other special program/project involvement, or;
2. Acting as a representative of WRAR on the Board of Directors or a committee, task force or Presidential Advisory Group (PAG) of the Massachusetts Association of REALTORS® and/or the National Association of REALTORS®.

Nominee:

Title: \_\_\_Ms. \_\_\_Mr. \_\_\_Miss \_\_\_Mrs.

\_\_\_\_\_
First Name Mid initial Last Name

Name of Office\_\_\_\_\_

Office Address\_\_\_\_\_City\_\_\_\_\_State\_\_\_\_\_Zip\_\_\_\_\_

Office Phone (\_\_\_\_)\_\_\_\_\_Ext.\_\_\_\_\_ Office Fax (\_\_\_\_)\_\_\_\_\_

E-Mail Address\_\_\_\_\_ Date of Birth\_\_\_\_\_

License Status:  Broker  Salesperson License Number \_\_\_\_\_ Exp. Date \_\_\_\_\_

Have you ever served on any committee, task force, or Presidential Advisory Group (PAG) of the RACM, MAR, or NAR?  Yes  No

If yes, which committee(s), task force, Presidential Advisory Group and when

_____	RACM <input type="checkbox"/>	MAR <input type="checkbox"/>	NAR <input type="checkbox"/>	_____
Committee				Year
_____	RACM <input type="checkbox"/>	MAR <input type="checkbox"/>	NAR <input type="checkbox"/>	_____
Committee				Year
_____	RACM <input type="checkbox"/>	MAR <input type="checkbox"/>	NAR <input type="checkbox"/>	_____
Committee				Year
_____	RACM <input type="checkbox"/>	MAR <input type="checkbox"/>	NAR <input type="checkbox"/>	_____
Committee				Year
_____	RACM <input type="checkbox"/>	MAR <input type="checkbox"/>	NAR <input type="checkbox"/>	_____
Committee				Year

Other Association volunteer activities (include year)

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(Please use the reverse side of this application to list additional activities, if necessary)

If elected by the Board of Directors, I understand that my LOCAL dues payment to the Worcester Regional Association of REALTORS® will no longer be required. I am, however, still required to make payment for the Massachusetts and the National Association of REALTORS® dues.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date