

Affiliate Membership Application

North Bay Association of REALTORS® | Effective October 13, 2025



Important Information

- All questions must be completed to process the application; please submit to info@nba.realtor.
- Dues and assessments are set forth separately in [Exhibit A: Membership Dues and Assessments](#)
- Membership is granted to the individual affiliate member, not the entire company or team.

Applicant General Information

1. Full Name: _____

2. Nickname/Preferred: _____

3. License Numbers (if applicable): _____
Real Estate Lic # Mortgage Loan Originator Lic #

4. Address (home): _____
Street City State Zip Code

5. Phone Numbers: _____
Phone (mobile) Phone (home/other)

- SMS opt-in:** I agree to receive text messages (SMS) from the North Bay Association of REALTORS® related to membership communications, events, dues reminders, and Association updates. Message frequency may vary. Message and data rates may apply. Reply STOP to opt out at any time or HELP for help. View our Privacy Policy: <https://nba.realtor/membership/join/>

6. Email Address (primary): _____

7. Website Address (business/primary): _____

8. Date of Birth (MM/DD/YYYY): _____

9. Chapter/Market Area Selection

9a. Please select your PRIMARY chapter/market area (select only one):

- | | | |
|--|--|--|
| <input type="checkbox"/> Mendocino/Lake | <input type="checkbox"/> Petaluma | <input type="checkbox"/> Sonoma Valley |
| <input type="checkbox"/> Napa County | <input type="checkbox"/> Rohnert Park/Cotati | <input type="checkbox"/> West Sonoma County
(Sebastopol, Russian River) |
| <input type="checkbox"/> North Sonoma County
(Healdsburg, Cloverdale) | <input type="checkbox"/> Santa Rosa | <input type="checkbox"/> Windsor |

9b. Please select your SECONDARY chapter/market area (select up to two):

<input type="checkbox"/> Mendocino/Lake	<input type="checkbox"/> Petaluma	<input type="checkbox"/> Sonoma Valley
<input type="checkbox"/> Napa County	<input type="checkbox"/> Rohnert Park/Cotati	<input type="checkbox"/> West Sonoma County (Sebastopol, Russian River)
<input type="checkbox"/> North Sonoma County (Healdsburg, Cloverdale)	<input type="checkbox"/> Santa Rosa	<input type="checkbox"/> Windsor

Applicant Business Information

10. Office/Business Name: _____

11. Address (office): _____
 Street City State Zip Code

Preferred Primary Mailing Address: Home Office

12. Phone Numbers: _____
 Phone (office main) Phone (office direct)

Preferred Primary Phone Number: Mobile Home/other Office Main Office Direct

13. Category of Services Provided		
<input type="checkbox"/> Accountant	<input type="checkbox"/> Inspections	<input type="checkbox"/> Rentals (long-term)
<input type="checkbox"/> Advertising/Publications	<input type="checkbox"/> Insurance	<input type="checkbox"/> Rentals (short-term/vacation)
<input type="checkbox"/> Appraisal	<input type="checkbox"/> Landscaping	<input type="checkbox"/> Staging/Design
<input type="checkbox"/> Business Services	<input type="checkbox"/> Legal/Mediation	<input type="checkbox"/> Title/Escrow
<input type="checkbox"/> Cleaning/Restoration	<input type="checkbox"/> Mortgage/Financial	<input type="checkbox"/> Transaction Coordination
<input type="checkbox"/> Construction/Engineering	<input type="checkbox"/> Moving/Storage/Organizing	<input type="checkbox"/> Utilities/Electrical/Power
<input type="checkbox"/> Disclosure Services	<input type="checkbox"/> Photography	<input type="checkbox"/> Wildfire Mitigation
<input type="checkbox"/> Flooring	<input type="checkbox"/> Plumbing	<input type="checkbox"/> Other:
<input type="checkbox"/> Home Warranty	<input type="checkbox"/> Property Management	
Description of Business/Services:		

Acknowledgements and Agreements

1. **Membership and benefits** are granted to the individual member, not the entire company or team.

2. **Membership Category:** I understand the qualifications and conditions applicable to Affiliate membership and agree that I will abide by such qualifications and conditions. I also understand and agree as follows: If I (i) engage in any acts that require a California Real Estate License of any kind, or (ii) if I currently have or in the future obtain a California Real Estate License I will be required to join the North Bay Association of REALTORS® as a REALTOR® member.

Bylaws Section 5.4. Affiliate members shall be real estate owners, and other individuals or firms engaged in activities related to the real estate profession, who either (i) do not qualify for REALTOR® membership, (ii) who qualify for REALTOR® membership but agree not to seek such membership, nor engage in any acts that require a California Real Estate License of any kind, and only have Affiliate membership. For avoidance of doubt, if an applicant has a REALTOR® membership and wants Affiliate membership, that applicant must pay

for both REALTOR® membership and Affiliate membership. Affiliate members have interests requiring information concerning real estate and sympathy with the objectives of the A.O.R.

Applicant's Initials: _____

3. Dues & Refunds. I understand that I am responsible for submitting dues payments annually on or before January 1, and that a non-refundable late fee is automatically assessed when dues are 14-days delinquent. I understand that my Association dues and fees are non-refundable. In the event I fail to maintain eligibility for membership or for any reason, I understand I will not be entitled to a refund of my dues or fees.

Applicant's Initials: _____

4. I understand that I am responsible for ensuring my **member record and contact information** are up to date. This can be accomplished by accessing my member dashboard on the Association's website or emailing the information to info@nba.realtor.

Applicant's Initials: _____

5. I understand that any **information gathered under this authorization may be used in evaluating my application** for membership and future disciplinary sanctions. I waive any legal claim or cause of action against the Association, its agents, employees or members including, but not limited to, slander, libel or defamation of character, that may arise from any action taken to verify, evaluate or process this application or other use of the information authorized and released hereunder.

Applicant's Initials: _____

6. By signing below, I **expressly authorize the Association**, including the local, state and national, or their subsidiaries or representatives to email, telephone, text or send by U.S. Mail to me, at the email address, telephone and text numbers and addresses above, for any and all Association (including the local, state, and national, or their subsidiaries or representatives) communications, including but not limited to those for political purposes and/or material advertising the availability of or quality of any property, goods or services offered, endorsed or promoted by the Association (including the local, state and national, or their subsidiaries or representatives).

Sign and Certify

I certify that I have read and agree to the terms and conditions of this application, that I meet the requirements for Affiliate membership and that all information given in this application is true and correct.

Applicant Signature

Date

Please submit completed application to info@nba.realtor. Incomplete applications cannot be processed. Please contact our Member Services team with any questions, thank you.