

MEMBERSHIP DROP REQUEST FORM

Member Name: _____

Member License Number: _____

Member Email Address: _____

Member Phone Number: _____

Member Home Address: _____

Home City: _____ Home State: _____ Zip Code: _____

Office: _____

BIC: _____

Effective Date: _____

Please check atleast one box as to why you wish to drop

☐ Joining another association

☐ Relocating

☐ No longer working in Real Estate

☐ Severed from member firm*

☐ Retiring

☐ Other _____

***If severing from the firm, the unaffiliation confirmation showing this was done with NCREC must be provided.**

Sentrilock

☐ I have already returned all Sentrilock lockboxes in my possession to the CCAR office

☐ I will return the lockboxes in my possession to the CCAR office

☐ I never had any leased Sentrilock lockboxes in my possession

☐ I understand that failure to return Sentrilock lockboxes will result in an assessment at the current replacement cost. If a police report for stolen lockboxes or a police or fire report for destroyed lockboxes is provided, the replacement cost will be waived.

IDX/RETS

☐ I DO NOT have an IDX RETS Feed

☐ I DO have an IDX RETS feed

Are you a member of a Team?

☐ Yes

☐ No

☐ I understand that if all outstanding bills are satisfied, I will resign as a member in good standing and will be able to reapply within the current calendar year to the Association by paying a reinstatement fee. I also understand that if I resign and choose to re-activate during the next calendar year, I must re-apply as a new member paying an application fee and non-prorated dues.

Refund Policy: Dues shall be computed from the date of application and shall be NON-Refundable. All outstanding balances must be paid before we are able to make the membership inactive.

I do hereby request to resign from the Carteret County Association of REALTORS®

Member Signature: _____

Effective Date: _____

Please email completed form to traci@ccarrealtors.com or fax to Traci at (252) 247-3332.