



Lassen Association of Realtors® Affiliate Application

Name _____

Firm Name _____

Firm Address _____

Firm Telephone Number _____

Cell Number _____

If you have a license, type and number _____

Home Address _____

Mailing Address, if different _____

E-mail Address _____

Any reason you shouldn't be accepted by our Board as an Affiliate?

Yes No

Signature _____ Date _____