

N.E.W.R.A.

2010

Membership Application

Name: _____

Company: _____

Address: _____

City/ST/Zip: _____ OH _____

Phone: _____ Office _____ Cell _____

E-mail Address: _____

Membership Type

R.E. Broker/Manager \$10.00 _____

Licensed Realtor/Agent \$10.00 _____

My Broker/Manager is: _____

Affiliate Member \$15.00 _____

I agree to support the Association by my attendance and participation. I further agree to abide by the By-Laws and any regulations approved by the membership.

_____ Date _____

Signature

Please make checks payable to **N.E.W.R.A.** Attach 2 business cards with this application.

Mail to: Ken Kress
Third Federal Savings
1960 Schrock Road
Columbus, Ohio 43229