



## REALTOR® Emeritus Application

(Please type or print legibly)

Member Name: \_\_\_\_\_

Office Name: \_\_\_\_\_

Office Address: \_\_\_\_\_

City / State: \_\_\_\_\_ Zip: \_\_\_\_\_

NRDS ID or C.A.R. Member Number: \_\_\_\_\_

Year Joined Association: \_\_\_\_\_

What committee(s) have you served in? \_\_\_\_\_

\_\_\_\_\_

Position held in the committee (ex: past president): \_\_\_\_\_

Years served in committee(s)? \_\_\_\_\_

\*A dues waiver does not take effect until the following “dues season.” REALTOR® Emeritus members are exempt from the Biennial Ethics Training requirement. Additional information and application requirements are available on **NAR's website**.

Please submit completed application to Sandra at [membership@rsaor.com](mailto:membership@rsaor.com)