

# Application for IREIBA Membership



Application Date: \_\_\_\_\_

- \$50 Independent Broker (Managing Broker)
- \$50 Broker (Associate of an IREIBA Independent Broker)
- \$50 Affiliate

**IREIBA** Membership is open to all **Independent Real Estate Brokers** (Managing Brokers), Brokers who are not associated with a large national or local franchise, **Brokers** (Associates) who work with/under an IREIBA Independent Broker, and **Affiliates** (vendors/business professionals) that are actively engaged in a specialty of the real estate industry.

**IREIBA** Membership Dues are currently **\$50** per year for all Members, due Jan 1 of each year.

Applicants pay \$50 for first year dues with application. New Members pay a prorated amount for their first renewal.

**IREIBA** does not discriminate against any person for reasons of race, color, religion, sex, handicap, familial status, national origin or sexual orientation.

**APPLICANT:**

*Please print legibly*

Name \_\_\_\_\_

Company \_\_\_\_\_

Mailing Address \_\_\_\_\_

Mobile Phn # \_\_\_\_\_ Office Phn # \_\_\_\_\_

Email \_\_\_\_\_

**BROKER** Indiana Broker Lic # \_\_\_\_\_

**AFFILIATIONS:** *Note, MIBOR, BOR, NAR Membership is encouraged, but not required for Brokers or Affiliates*

MIBOR # \_\_\_\_\_ NAR # \_\_\_\_\_

Other REALTOR Board Name \_\_\_\_\_ Board # \_\_\_\_\_

Other Real Estate Organizations or Certifications \_\_\_\_\_

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**REFERENCES:**

IREIBA Member Sponsor: \_\_\_\_\_

Please provide three Brokers with whom you've done business that will vouch for you.

1. Name: \_\_\_\_\_ Company \_\_\_\_\_ Phn# \_\_\_\_\_
2. Name: \_\_\_\_\_ Company \_\_\_\_\_ Phn# \_\_\_\_\_
3. Name: \_\_\_\_\_ Company \_\_\_\_\_ Phn# \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Dues can be paid online at [www.ireiba.com](http://www.ireiba.com), mailed to our PO Box, or brought to a meeting.

**IREIBA.com Email: [IREIBA2001@gmail.com](mailto:IREIBA2001@gmail.com) Mailing Address: IREIBA PO Box 44627 Indianapolis IN 46244-0627**