

Application for Membership



Type of Membership **Application Date:** _____

Managing Broker - \$50

Broker - \$50

Affiliate - \$50

Membership is open to all Independent Brokers who are not associated with a large national or local franchise, and to businesses that are actively engaged in a specialty of the real estate industry. IREIBA does not discriminate against any person for reasons of race, color, religion, sex, handicap, familial status, national origin or sexual orientation.

Name: _____

Company: _____

Mailing Address: _____

Office Phone: _____ **Mobile:** _____

Email: _____

IREIBA Sponsor: _____ **Broker #** _____

References: Please provide three brokers with whom you've done business.

Name: _____ Company & Phone _____

Name: _____ Company & Phone _____

Name: _____ Company & Phone _____

Affiliations:

() MIBOR Number: _____ () NAR: _____

() Other Board of REALTORS

() Other Real Estate Organizations or Certifications _____

Signature _____ **Date** _____

Please print legibly. Please post information as written on the website after approval.

Dues can be paid on line at www.ireiba.com, mailed to P.O. Box or at meetings.

Email: ireiba2013@gmail.com

Mailing Address: IREIBA - P.O. Box 44627 Indianapolis, IN 46244

*****Please Scan this application and email to: ireiba2013@gmail.com*****