

## Emeritus Status Program Application

Affiliate Member

Emeritus status is offered by REALTOR® associations to recognize an individual's contributions and longevity to the REALTOR® community and industry.

### Criteria

GCAAR recognizes the outstanding contributions of our affiliate members and has established the following criteria, effective starting with the 2022 billing cycle:

- Any affiliate member who has held an affiliate membership with GCAAR\* for 40 or more years and has proof of at least one year of service on a committee with GCAAR\*.

*\*Including Montgomery County Board of REALTORS®, Montgomery County Association of REALTORS®, and/or Washington DC Association of REALTORS®*

### Deadline

Applications are due to GCAAR by July 31 preceding the fall billing cycle. If approved, local GCAAR dues will be waived for affiliate membership through GCAAR.

**PLEASE NOTE: INCOMPLETE APPLICATIONS CANNOT BE PROCESSED.**



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## Affiliate Applicant Information

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*Title      Name                                  MI                                  Last Name                                  Nickname*  
(Name as listed on your Real Estate, Appraiser, or Property Management license.)

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*Work E-Mail    Cell Phone    Date joined GCAAR/MCAR/WDCAR*

Did your affiliate membership ever lapse?    YES    NO

If yes, when? \_\_\_\_\_

## Current Company Information

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*Company Name    Direct Office Phone*

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*Company Address                                  Suite #                                  City                                  State                                  Zip Code*

## GCAAR/MCAR/WDCAR Committee Involvement

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*Committee Name    Association Name    Year Served*

## Documentation

Please attach any relevant documentation, which could include local REALTOR® membership application, certificates, correspondence, minutes of meetings, newspaper articles, Board/Association publications.

## Certification

I hereby certify that the foregoing information furnished by me is true and correct, and I agree that failure to provide complete and accurate information as requested, or any misstatement of fact, shall be grounds for revocation of my membership if granted.

## Application by

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Signature

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Name Printed

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Date