



RLI CAROLINAS CHAPTER
2019-2020 MEMBERSHIP APPLICATION
(Please attach your business card)

Applicant's Name: _____

Company: _____

Mailing Address: _____

City/State/Zip: _____

Telephone: (____) _____ **Fax:** (____) _____

Email: _____

Member of which Local REALTOR Board/Association:

(Please Specify) _____

Real Estate License Number _____ **State:** _____

Membership Type:

Commercial

Auctioneering

Residential

Other (please specify) _____

Affiliate Member

Land

Other Designations:

(please specify): _____

Payment Information: \$50 dollars for 2019-2020 RLI Carolinas Membership

Payment type (check one): Cash Check Enclosed (US funds)

Check Number: _____ Amt. Enclosed \$ _____

Mail or Fax completed form with payment to:

(Make check payable to RLI Carolinas)

Rekeeda McCoy

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Phone: 336-854-5868

Email: rmccoy@grra.org