

# 2023-24 MEMBERSHIP APPLICATION



## Hampton Roads Association of Real Estate Brokers

a National Association of Real Estate Brokers chapter  
P.O Box 14752, Newport News, VA 23608  
P: (757) 715-1179 | [membership@VirginiaRealtist.com](mailto:membership@VirginiaRealtist.com)  
[www.VirginiaRealtist.com](http://www.VirginiaRealtist.com)

### Member Information

|  |                           |   |  |
|--|---------------------------|---|--|
| Your Full Name:  |                           | License Number (DPOR, NMLS, ETC.):                          |  |
| Company Name:  |                           | Department / Branch:  |  |
| Street Address:  |                           | Suite / Floor / Mailstop:                                   |  |
| City, State, Zip Code:   |                           | Office Phone:   |  |
| Email Address:   |                           | Mobile Phone:   |  |
| Website Address:   |                           | Mail Correspondence to my:   Office       Home              |  |
| Home Address:  |                           | City, State, Zip Code:                                      |  |
| Veteran:   | Service-Disabled Veteran: | Application Type / Annual Fee:                              |  |
| Branch of Service:   |                           | Broker:       \$230.00 (Local - \$80.00 National \$150.00)  |  |
| U.S. Army       U.S. Air Force       U.S. Coast Guard       U.S. Marines |                           | Sales Agent: \$210.00 (Local - \$85.00 National \$125.00)   |  |
| U.S. Navy       U.S. Space Force       National Guard                    |                           | Affiliate:     \$195.00 (Local - \$100.00 National \$95.00) |  |

Upon approval of this membership application, I hereby agree to adhere to and abide by the Constitution, By Laws, and Code of Ethics of the [National Association of Real Estate Brokers, Inc.](http://www.NationalAssociationofRealEstateBrokers.org)

I am applying for membership as or renewing as a (Check One): **Broker**                      **Sales Agent**                      **Affiliate**

Signature: \_\_\_\_\_

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

Please mail your completed Membership Application and Annual Fee to:

**Hampton Roads Association of Real Estate Brokers**  
**P.O Box 14752, Newport News, VA 23608**

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**DO NOT WRITE BELOW THIS LINE**  
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Amount Received: \_\_\_\_\_

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

Membership Chair: \_\_\_\_\_

Approved

Disapproved

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

Board of Directors: \_\_\_\_\_

Approved

Disapproved

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