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**APPLICATION FOR AFFILIATE MEMBERSHIP**  
**Local Annual Dues \$100**

Name of firm: \_\_\_\_\_

Type of Business: \_\_\_\_\_

Contact person: \_\_\_\_\_

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

Physical Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email address: \_\_\_\_\_ Website: \_\_\_\_\_

**Areas Served**

- South Padre Island
- Port Isabel
- Laguna Heights
- Laguna Vista
- Los Fresnos
- Bayview

**Members**

- 160 REALTORS®
- 15 Appraisers
- 20 Affiliates

**BENEFITS OF MEMBERSHIP**

- **Your company listing on the South Padre Island Board of REALTORS® website includes contact information, link, photo & company logo on [www.SPIRealtors.com](http://www.SPIRealtors.com)**
- **Your company listing on our Multiple Listing Service (Navica)**
- **Access to our REALTOR mailing list**
- **Invited to SPIBOR membership functions, seminars and educational sessions**
- **Attend Local membership meetings**
- **Opportunities to be a sponsor and speak at SPIBOR functions & advertise services**
- **Receive Email updates on issues affecting our area and industry**
- **Networking opportunities**
- **Place promotional materials in the lobby of SPIBOR office**
- **Increased business opportunities through REALTOR® referrals**

What professional designations, if any, do you hold? \_\_\_\_\_

Would you be willing to be a sponsor for Membership meetings? \_\_\_\_\_

Would you be willing to be a speaker at a Membership meeting? \_\_\_\_\_

Were you referred by someone? Is yes, by whom? \_\_\_\_\_

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, may be grounds for revocation of my membership, if granted.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_