



2008 LOCAL AFFILIATE
MEMBERSHIP APPLICATION
West Suburban Chapter - Illinois

NOTE: IF YOU ARE A MEMBER OF THE LOCAL BOARD, PLEASE USE THE NATIONAL MEMBERSHIP APPLICATION.

Name: _____ Company Name: _____

Business Address: _____

Business City/State/Zip: _____

Bus. Phone :(_____) _____ Bus. Fax :(_____) _____

Home Address: _____

Home City/State/Zip: _____

Home Phone :(_____) _____ Home Fax: (_____) _____

Cell Phone: (_____) _____ Birthday: Month _____ Day _____

I would like mail sent to my: Business Residence

Who may we thank for introducing you to our Chapter? _____

Do we have your permission to fax or email information to you? Yes No

Preferred Fax #: _____

Email Address: _____

Web Site URL: _____

DUES AMOUNT OWED

TOTAL DUES: \$ 75.00

New Member _____ Renewal _____

DUES PAYMENT

Check for \$ _____ (payable to "WCR") is enclosed.

Please send completed application along with payment to:

Women's Council of REALTORS®
219 W. Hillgrove Avenue
La Grange, IL 60525

**For More Information, Contact Michael Moore, 2008 Vice-President/Membership, 708.528.9213,
debra.defrancesco@cbexchange.com OR Fax Application to 708.632.5910**

www.illinoiswcr.org

FOR LOCAL CHAPTER USE ONLY

Application process completed by _____

Date _____

Check # _____ sent to Treasurer on ____/____/____.