AUSTIN COMMERCIAL REAL ESTATE SOCIETY MEMBERSHIP APPLICATION

Name:	
Business Name:	
Business Address:	
Phone:	Fax:
Home Address:	
E-Mail Address:	Fax:
License Number:	Year Issued:
Principal Real Estate Business (%):	
Income Property% Land%	Management% Leasing%
Other (Explain)	
Professional Designations	Owner of Your Company? Yes No
College	Graduate Yes No Year
List your residency for the last five years (Broker) or seven ye	ears (Agent) (city/year):
Other Organizations or Professional Groups to Which You B	Belong:
Name of Sponsoring A.C.R.E.S. Member:	
How Long Has He/She Known You?	
Names of Two Co-Sponsors (must be current ACRES member	rs):
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Please tell us why you would like to be a member of ACRES:	
Please list additional names of brokers or owners that you hat integrity and professionalism.	· · · · · · · · · · · · · · · · · · ·
	Date