



Business Partner Benefits

- Your company information will be listed in the Business Partner Directory online & in print. Distributed to all Firms affiliated with RASM.
- Hundreds of chances to sponsor classes/events– speak to our members
- May purchase Member mailing labels.
- Attend over 2,000 education events per year at discounted RASM member rates.
- Business Partners receive the Associations Elevate magazine.
- Business Partners can advertise in the Realtor Association magazine at reduced rates. The magazine is sent to 7000+ members.
- Attend RASM’s Annual Meeting & Expo as well as RASM’s Annual Installation Banquet at member rate – or sponsor.
- Business Partners may serve on selected Association committees.
- Attend RASM After Hours – Networking Events.
- Attend the Bi-Monthly Business Partner Membership Meetings and be the first to sign up to sponsor select classes and events.
- Put your Business Card in our Business Partner Card Directory.
- Use of Association’s meeting rooms/auditorium at a discounted rate.
- Building priceless contacts at a great membership price.
- Ability to use RASM's recording studio at a discounted rate.

Who can join?

Affiliate Memberships are available to individuals whose businesses provide product and services that are related to real estate. Membership is individual and is not considered “company based.” Each individual within an office must join in order to be considered a member and attend or participate in association events. Memberships are renewed annually on December 15th.

** Auxiliary membership is associated with or employed by an active Primary Affiliate Business. \$50.00 annually (valid from the time you join to the end of calendar year). Auxiliary members joining November and December will be charged the following years dues cycle as well.

Membership Costs:

Dues for new affiliates are based upon the month they join

Date	Fees	Date	Fees
January	\$250.00	July	\$125.00
February	\$229.17	August	\$104.17
March	\$208.33	September	\$83.33
April	\$187.50	October	\$62.50
May	\$166.67	*November	\$291.67
June	\$145.83	*December	\$270.83

**Auxiliary members \$50.00 yearly not prorated. * November & December includes next years dues

Please submit your completed application with payment to:
Email: Membership@myrasm.com | Fax: 941-952-3401
2320 Cattlemen Road, Sarasota, Florida 34232
417 12th Street West Unit 106, Bradenton, Florida 34205



OFFICE USE ONLY	
RASM Member #:	_____
User ID:	_____
Password:	_____
Date Entered/Paid:	_____

Primary Contact Information Primary Affiliate Auxiliary Member

Business Partner Firm Name: _____

Member Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Website: www. _____

Phone: _____ Email: _____

Firm Business Type

- | | | |
|---|---|---|
| <input type="checkbox"/> A/C Services | <input type="checkbox"/> Builder/Developer | <input type="checkbox"/> Insurance Services |
| <input type="checkbox"/> Accountant/CPA | <input type="checkbox"/> Financial Services | <input type="checkbox"/> Mortgage Services |
| <input type="checkbox"/> Architect/Designer | <input type="checkbox"/> Flooring | <input type="checkbox"/> Pest Control |
| <input type="checkbox"/> Attorney | <input type="checkbox"/> General Contractor | <input type="checkbox"/> Photography |
| <input type="checkbox"/> Banking Institute | <input type="checkbox"/> Home Inspector | <input type="checkbox"/> Other _____ |

ACKNOWLEDGMENT AND SIGNATURE

By entering your full name and today's date, you agree to abide by the Bylaws and Policies and Procedures of the REALTOR® Association of Sarasota and Manatee.

I understand that my Affiliate Membership with RASM does not include membership in the National Association of REALTORS® and Florida REALTORS®.

I irrevocably waive all claims against the Association, or any of its officers, directors, members, or employees for any acts in connection with the business of the Association, and particularly as to its or their acts in electing or failing to elect, advance, suspend, expel, or otherwise discipline me as an applicant or member.

I agree to pay the established fees as long as I remain a member and will notify the Association of any changes in my registration, status and/or address.

_____	_____
Signature	Date

Payment Method: Check# _____ Visa American Express MasterCard

Credit Card No. _____ Exp: ____/____ CVV _____ Amount \$ _____

Signature _____ Date: _____

Check here if you would like to contribute \$20 for FR PAC Assessment

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