

REALTORS® ASSOCIATION OF YORK & ADAMS COUNTIES, INC.

APPLICATION FOR SECONDARY AFFILIATE CONTACT

Firm Name _____

Address _____

Phone # (_____) _____

Secondary Contact Name _____

Secondary Contact Phone # _____

Secondary Contact E-mail Address _____

A Primary Contact for this location must exist before a Secondary Contact may be established.

Secondary contact fees: \$50.00 per year plus \$25.00 application fee.

Secondary contact benefits include:

- Monthly newsletter
- E-mail communications from RAYAC
- Name will appear in semi-annual RAYAC directory
- Name will appear on RAYAC website under company name

Signature and Title of Secondary Contact Person

Date

Signature and Title of Company Official

Date

REALTORS® Association of York & Adams Counties, Inc.
435 W. Philadelphia Street
York, PA 17404

FOR ASSOCIATION USE ONLY

Date Application & Dues received _____