

Membership Reinstatement Form

PLEASE NOTE:

CARA and CREA consider any member who pauses their licence for over 2 years (24 months) to be a new member and will be subject to new member fees and mandatory orientation.

Applicant Information			
Full Legal Name (First, Middle, Last)			
Alias Registered with RECA (example: full name is William but you go by Bill)			
Address			City
Province AB	Postal Code	Cell Number	
Email Address		Website	
Brokerage Information			
Brokerage Name			
Address			City
Province AB	Postal Code	Phone Number	

Statement by Broker

I hereby certify that I have investigated the Applicants' qualifications and personal reputation and I recommend this Applicant for membership in the Central Alberta REALTORS® Association.

Signature of Broker	Date
Signature of Applicant	Date

**All completed forms should be delivered to Erin
at eandersen@carassociation.ca or via fax 403.347.9080**

Office Use Only

Reinstatement Fee \$180.00

Date Completed: _____