

Date: _____



MEMBERSHIP APPLICATION

Place a √ in the box(s) below that you DO NOT wish to have published in LIREIA's Membership Directory, or otherwise make available, without permission.

Member

Name: _____

Home Address: _____

City: _____, State: _____ Zip: _____ Email: _____

Home Ph: _____ Cell Ph: _____ Fax: _____

Company Name: _____ Profession: _____

Work Address: _____ Bus. Ph: _____

City: _____, State: _____ Zip: _____ Web: _____

HOW DID YOU HEAR ABOUT LIREIA?		
<input type="checkbox"/> Newspaper	<input type="checkbox"/> Mailing	<input type="checkbox"/> Email
<input type="checkbox"/> Call From Us	<input type="checkbox"/> Friend	<input type="checkbox"/> Member
<input type="checkbox"/> Internet Ad	<input type="checkbox"/> Web Site	<input type="checkbox"/> Web Search

Additional Member If Applicable

Name: _____

Home Address: _____

City: _____, State: _____ Zip: _____ Email: _____

Home Ph: _____ Cell Ph: _____ Fax: _____

Company Name: _____ Profession: _____

Work Address: _____ Bus. Ph: _____

City: _____, State: _____ Zip: _____ Web: _____

HOW DID YOU HEAR ABOUT LIREIA?		
<input type="checkbox"/> Newspaper	<input type="checkbox"/> Mailing	<input type="checkbox"/> Email
<input type="checkbox"/> Call From Us	<input type="checkbox"/> Friend	<input type="checkbox"/> Member
<input type="checkbox"/> Internet Ad	<input type="checkbox"/> Web Site	<input type="checkbox"/> Web Search

DISCLAIMER and RELEASE
(Read Carefully Before Signing Below)

Long Island Real Estate Investors Association, hereinafter called the LIREIA, does not render legal tax, economic or investment advice. LIREIA does not investigate its members, nor vouch for nor make representations as to their integrity, reliability, motives and/or resources of its members, officers, directors, employees, agents and/or contractors. Person(s) should consult with his or her own counsel, accountant, and other advisors as to risks and legal, tax, economic, investment and other matters concerning real estate and other investments. The undersigned Applicant(s), in consideration for his/her/their acceptance as member(s) of LIREIA, hereby release(s), discharge(s) and agree(s) to indemnify LIREIA, its officers, directors, members, employees, agents and/or contractors from any liabilities now accrued, or which may hereinafter accrue, from his/her/their actions, inactions, or communications made by LIREIA and/or its officers, directors, members, employees, agents, and/or contractors in or through their respective capacities with LIREIA. Members agree to comply with the Code of Ethics and the By-Laws of the Association.

Applicant(s) also agree(s) to have his/her/their contact info above shared with other LIREIA members, upon request, and to have same published by LIREIA in a Membership Directory, either on or offline, or both. If Applicant wishes not to have one or more pieces of information made public he/she/they will signify same by placing a check in the appropriate box(s) provided above. Further, Applicant understands, agrees to and accepts that once paid, Membership Fees are non-refundable, in full or in part, and may be transferred without notice, to a program / benefit set deemed of equal or greater value, as determined solely and exclusively by LIREIA.

BY SUBMITTING THIS APPLICATION, THE UNDERSIGNED ACKNOWLEDGES, AND AGREES THAT HE/SHE/THEY HAS/HAVE CAREFULLY READ AND FULLY UNDERSTAND THE ABOVE *DISCLAIMER AND RELEASE*.

Member Signature _____ Date _____ Additional Member Signature _____ Date _____

New Renewal	(N) (R)	ID #(s) (If Renewal)	Membership Type	Comments	1 yr. (circle one)	2 yrs.
			Individual		\$225	\$425
			Partner	(1) Individual + Spouse, (2) Live-In-Partner, (3) Live-In Committed Relationship, (4) Family Member(s) in same household.	\$300	\$575

CHECK Check #: _____ (Make Check Payable to LIREIA) **CASH** Received By: _____

C. CARD VISA MC AmEx Diners Exp Date: _____ C. Card #: _____

Signature: _____

LIREIA USE

Pmt Posted: _____ Database: _____ QC'd: _____ Folder Made: _____ Folder Filed: _____
Card(s) Made: _____ ID#(s): _____ Exp. Date: _____ Deliv: _____ Deliv Method: _____