

Authorization to charge my membership dues

I authorize the RI Commercial and Appraisal Board of REALTORS® to charge my dues with a credit card or deduct the amount owed from my checking account as indicated below.

(Please print clearly)

PAYMENT BY CREDIT CARD

Date: _____

Name on credit card: _____ Amount to be charged: _____

Credit card (please circle one): Mastercard Visa Discover American Express

Is your credit card a (please circle one): Personal credit card or a Corporate credit card

Card number: _____ Exp. Date: _____

For verification purposes please provide the address where you receive the monthly statement on the credit card:

Email Address where we may send the receipt:

Please provide a contact phone number: _____ Signature: _____

PAYMENT BY ELECTRONIC CHECK

Date: _____

(Please remember to record this check in your checkbook)

Account Number as it appears at the bottom of your check (please provide the entire string of numbers from left to right): _____ Check Number: _____

Amount to be charged: _____

Name & address on the account: _____

Email Address where we may send the receipt: _____

Driver's License Number: _____ Driver's License State: _____ Date of Birth: _____

Is this checking account (please circle one): Personal or Corporate

Please provide a contact phone number: _____ Signature: _____

**Please note: a payment receipt and verification regarding the processing of your membership application will be emailed to you shortly. Please save that documentation as a record of your charge.*

Your payment will appear on your statement as "REALTOR® Association/MLS."

Thank you for selecting the RI Commercial and Appraisal Board of REALTORS® as your Board of Choice. This form and your membership application may be faxed to (401) 421-4705.