



MONMOUTH COUNTY ASSOCIATION OF REALTORS[®], INC.

One Hovchild Plaza, 4000 Route 66, Tinton Falls, NJ 07753
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June 2008

To: Monmouth County Association of Realtors[®] Members

Fr: Donald T. Willis, Executive Vice President

Re: Quarter Century Club Application

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The Quarter Century Club has been in existence for over 18 years. Due to the overwhelming success of 175 recipients last year, we urge all members to apply who have served as REALTORS[®] or REALTOR ASSOCIATES[®] faithfully for 25 years or more.

The Quarter Century Club requirements are:

1. Membership open to members of NJAR[®] only, both REALTORS[®] and REALTOR ASSOCIATES[®]
2. NJAR membership for at least 25 years (does not have to be consecutive).
Those persons who have been in the real estate business but NOT members of NJAR for 25 years of more are NOT eligible.
3. **Burden of proof of membership in NJAR is the responsibility of the applicant.**
4. Applicants will be requested to send application with proof of membership along with a check for \$10.00, payable to NJAR to our office by September 15, 2008. Applications will be reviewed by the NJAR Quarter Century Club Committee prior to being admitted into the NJAR Quarter Century Club.
5. Pin and certificate will be distributed by the local Association from NJAR.

The application is posted on the List-It front page. It is to be completed by the member attaching all necessary documentation of proof of membership and returned to MCAR.

If you have any questions, please contact Nancy Ciccocanti at MCAR at 732-918-1340.

NEW JERSEY ASSOCIATION OF REALTORS®

**QUARTER CENTURY CLUB
APPLICATION**

(return to your local board/association of REALTORS®
no later than September 15, 2008)

RULES:

1. Membership open to current members of NJAR only, both REALTORS® and REALTOR-ASSOCIATES®
2. NJAR Membership for at least a total of 25 years (does not have to be consecutive).
3. *Proof of membership is the responsibility of the applicant. Attach appropriate documentation to this application and return to your local board/association before **SEPTEMBER 15, 2008**.*
4. Pin and certificate will be purchased by local board/association from NJAR (\$10.00 per member).

NAME _____ NRDS# _____

NAME AS YOU WOULD LIKE
IT TO APPEAR ON CERTIFICATE _____

REALTOR®/REALTOR ASSOCIATE® INCEPTION DATE MONTH ____ /YEAR ____

FIRM NAME _____

FIRM ADDRESS _____ ZIP CODE _____

PHONE _____ FAX _____

E-Mail _____

LOCAL BOARD/ASSOCIATION THROUGH WHICH YOU ARE APPLYING

I CERTIFY THAT I HAVE READ RULES AND REGULATIONS AND AM ABIDING BY SAME.
ALL OF THE FACTS AND INFORMATION ATTACHED TO THIS APPLICATION ARE CORRECT
AND TRUE TO THE BEST OF MY KNOWLEDGE.

SIGNATURE OF
APPLICANT _____ DATE _____