



Affiliate Application

We are pleased that you are interested in joining the Champaign County Association of REALTORS® (CCAR). Affiliate membership with CCAR opens the door to a wide variety of services and opportunities for networking and creating business relationships in the real estate industry. The application process is relatively simple. Please review the steps below. If you have any questions, please contact Shelly FitzGerald at 217-356-1389 ext. 1003 or shellyf@illinihomes.com.

Application Process:

1. Complete the application and submit to CCAR via
 - a. Email: Shelly FitzGerald at shellyf@illinihomes.com
 - b. Mail: CCAR, 305 Burwash Ave, Savoy, IL 61874
 - c. In-Person: 305 Burwash Ave, Savoy, IL 61874
2. CCAR Annual Dues Cycle: January 1 - December 31
 - a. Payment: You can pay with a credit card, check, or cash. Please make checks payable to CCAR. **Payment with application is preferred. Membership will only become active once payment is processed by the Association.**

2026 ANNUAL Affiliate Dues Schedule: (pro-rated based on the month membership begins)

	January	February	March	April	May	June
*CCAR	\$115.00	\$115.00	\$115.00	\$115.00	\$115.00	\$115.00
ILLINOIS REALTORS®	\$ 35.00	\$ 35.00	\$ 35.00	\$ 26.25	\$ 26.25	\$ 26.25
TOTALS	\$150.00	\$150.00	\$150.00	\$141.25	\$141.25	\$141.25
	July	August	September	October	November	December
*CCAR	\$115.00	\$115.00	\$115.00	\$115.00	\$115.00	\$115.00
ILLINOIS REALTORS®	\$ 17.50	\$ 17.50	\$ 17.50	\$ 8.75	\$ 8.75	\$ 8.75
TOTALS	\$132.50	\$132.50	\$132.50	\$123.75	\$123.75	\$123.75

*Secondary members are only responsible for local dues, as their state dues are covered through their primary association.



Serving Champaign County
and Surrounding Areas

AFFILIATE APPLICATION

Have you ever held membership with another Association prior to this application?

No Yes If yes, what Association were you with_____

Please select the category that best describes your business / company affiliation:

Association Bank Chamber Construction Contractor Electrical
 Furnishings Inspector Insurance Interior Design Landscaping Lending
 Marketing Mortgage Pest Control Photography Plumbing Title/Escrow
 Other please explain_____

Applicant Name:_____ Position:_____

Company Name:_____

Office Address:_____

Home Address:_____

Email Address:_____

Company Website:_____

Office Phone:_____ Cell Phone:_____

Contact methods: Office Phone Cell Phone Email Mail Text

I understand that by providing Champaign County Association of REALTORS® (CCAR) my contact information (mail, email, cell phone & social media, etc.). I consent to receive communications sent from CCAR, via mail, email, text and/or phone at the number and/or location listed above.

Signature _____ **Date** _____

I understand that if accepted for Affiliate individual membership in the Champaign County Association of REALTORS®, I will also be an Affiliate Member of ILLINOIS REALTORS®.

Do you currently hold an **ACTIVE** ILLINOIS Real Estate License? Yes #:_____ No

Signature: _____

Revised 01/26