RICHMOND ASSOCIATION OF REALTORS®

Form may be faxed to
804-422-5086

Central Virginia Regional

Auto Debit/Credit Authorization Form

Agent Name : _____

Member # : _____

Date : _____

I authorize the Richmond Association of REALTORS and/or Central Virginia Regional MLS to charge my Debit/Credit Card (Visa, MasterCard, or American Express) for the following charges (please check all that apply):

Annual National, State, and Local Dues, Fees and Assessments (NAR, VAR, RAR) ☐

Annual dues will be billed and charged on the first day of the month as indicated in the most recent iteration of the Bylaws.

Quarterly MLS Fees ☐

Quarterly fees will be billed and charged on the first day of the month as indicated in the most recent iteration of the MLS rules and regulations

BROKERS ONLY: **Store Charges and / or Event Fees** ☐

Circle One: **VISA** **MC** **AMEX**

Account Number: _____

Exp. Date : _____

I understand that, unless otherwise indicated below, voluntary contributions for RPAC (REALTOR® Political Action Committee) and REAP (Real Estate Assistance Program-which funds area housing non-profit organizations) will be charged to my debit/credit card as well.
We recommend that you log into www.rarealtors.com to view your account, verify your payment has been processed and print a receipt for your records.
It is the sole responsibility of the individual to notify the association if their card number or expiration date has changed.

I do not wish to contribute to :

- The REALTOR Political Action Committee (RPAC) ☐
- Real Estate Assistance Program (REAP) ☐
- Realtor Helping Realtor ☐

Signature : _____ Date : _____

A confirmation e-mail will be sent from the accounting department once this form has been received and your account has been updated. Please provide your current e-mail address below:

E-Mail Address: _____

This form replaces all previous forms on file by RAR and/or CVR MLS

Rev Date 12.17.09