



CREW CT - THE REAL ESTATE EXCHANGE  
MEMBERSHIP APPLICATION

PROFESSIONAL DATA

Name \_\_\_\_\_ Date \_\_\_\_\_

Employer \_\_\_\_\_

Business Owner? Y\_\_\_ N\_\_\_ Status: Full time \_\_\_\_\_ Part time \_\_\_\_\_

Job Description/Responsibilities:

[Empty text box for Job Description/Responsibilities]

Prior Professional Positions:

[Empty text box for Prior Professional Positions]

Licenses, Professional Certifications (type and jurisdiction):

[Empty text box for Licenses, Professional Certifications]

Explain briefly why you are seeking membership in CREW CT - The Real Estate Exchange:

[Empty text box for explanation of membership interest]

Describe briefly, any specific professional development goals you would like CREW CT, The Real Estate Exchange help you to accomplish:

[Empty text box for professional development goals]

**Active participation on a committee is required to maintain your membership status.**

Please indicate your first three committee choices in order of preference ([click here for more detail](#)).

- |                   |                                    |
|-------------------|------------------------------------|
| _____ Program     | _____ Professional Development     |
| _____ Membership  | _____ Communications               |
| _____ Sponsorship | _____ CREW Careers (youth program) |

Y\_\_\_ N\_\_\_ I would also like to be considered for appointment to the Blue Ribbon Committee.

Y\_\_\_ N\_\_\_ I am interested in CREW CT Sponsorship Opportunities.

**Your application must be sponsored by two current CREW Members.**

*If you have any questions, please contact your Sponsoring Members.*

	<u>Name</u>	<u>Company</u>
Sponsoring Member #1	_____	_____
Sponsoring Member #2	_____	_____

Meetings attended (One Required): \_\_\_\_\_



## CREW Network Member Data Sheet

Prefix:	Name:	Tag: <i>(MAI, JD, etc.)</i>
Chapter:		Chapter Membership Classification:

### Contact Information

Company Name:		Title:	
Business Address:			
City:		State/Province:	Postal Code:
Email:		Alternate Email:	
Work Phone:	Cell Phone:	License #: (optional)	

### Demographic Information

What year did you begin working in the commercial real estate industry?

From the list below, please identify the field in which you have expertise that qualifies you for membership. If not listed below, you are likely an Affiliate member; please use the "Other" blank to indicate your area of expertise.  
**NOTE: up to ten searchable values for your personal specialty can be added from your CREWbiz profile online.**

<input type="checkbox"/> Accounting	<input type="checkbox"/> Acquisitions / Dispositions	<input type="checkbox"/> Appraisal	<input type="checkbox"/> Architecture
<input type="checkbox"/> Asset Management	<input type="checkbox"/> Brokerage	<input type="checkbox"/> CRE Business Dev'tment <i>(100% CRE firm only)</i>	<input type="checkbox"/> Commercial Insurance
<input type="checkbox"/> Commercial Lending	<input type="checkbox"/> Construction Mgmt / General Contracting	<input type="checkbox"/> Consulting	<input type="checkbox"/> Corporate Real Estate
<input type="checkbox"/> Cost Segregation	<input type="checkbox"/> Economic Development	<input type="checkbox"/> Education	<input type="checkbox"/> Engineering
<input type="checkbox"/> Environmental	<input type="checkbox"/> CRE Executive	<input type="checkbox"/> Facility Management	<input type="checkbox"/> Finance
<input type="checkbox"/> CRE Human Resources	<input type="checkbox"/> Interior Design / Space Planning	<input type="checkbox"/> Investment Management	<input type="checkbox"/> Investor Relations
<input type="checkbox"/> Land Use Planning and Zoning	<input type="checkbox"/> Land Surveying	<input type="checkbox"/> Law	<input type="checkbox"/> Market Research
<input type="checkbox"/> Program Management / Project Management	<input type="checkbox"/> Property Management	<input type="checkbox"/> Public Sector	<input type="checkbox"/> Quasi-Governmental Trans. & Port Authority
<input type="checkbox"/> Real Estate Development	<input type="checkbox"/> Relocation Services, Corporate	<input type="checkbox"/> Risk Management	<input type="checkbox"/> Title / Escrow
Other: _____			

### Optional Information

Company Specialty / Industry Segment <i>(identify one from list above):</i>	What level are you in your current position <i>(select one)</i> : <input type="checkbox"/> C-Suite <input type="checkbox"/> SVP/VP/Partner <input type="checkbox"/> Senior Level <input type="checkbox"/> Self-Employed <input type="checkbox"/> Mid-Level/Assoc <input type="checkbox"/> Entry-Level	
Other Industry Affiliations:	<input type="checkbox"/> AI <input type="checkbox"/> BOMA <input type="checkbox"/> CCIM <input type="checkbox"/> CORENET <input type="checkbox"/> ICSC <input type="checkbox"/> IREM <input type="checkbox"/> NAIOP <input type="checkbox"/> SIOR <input type="checkbox"/> ULI      Other: _____	
Gender:	Ethnicity:	Date of Birth:
Home Address: <i>(incl. city, st, zip)</i>		Home Phone:

### MEMBERSHIP GUIDELINES

1. Applicants for Full (fka: Regular) membership must have been actively engaged in the CRE industry for at least five years.
2. Applicants for Affiliate (fka: Vendor) membership must have been actively engaged in the CRE industry for at least five years.  
*Affiliate members must complete a separate application*
3. Applicants for Associate membership must have been actively engaged in the CRE industry for less than five years.
4. Applicants for Civic membership must be engaged in local / regional government or other public agencies, not-for-profit organizations, or colleges / universities, etc.
5. Student memberships are available at a discounted rate.
6. Applicants for membership must have attended a minimum of one function prior to application for membership.
7. Two members in good standing must sponsor each applicant.
8. Each member must serve on at least one committee.
9. The maximum number of Full members in each Specialty shall not exceed 18% of total membership.
10. The total number of Associate, Affiliate, Civic, Retired and Student members shall not exceed 25% of total membership (in accordance with the Bylaws).
11. If a membership Category or Specialty is filled, the applicant may be placed on a waiting list.
12. Memberships are held on an individual basis and are not transferable.
13. The membership term follows the calendar year (January 1 through December 31).
14. Member agrees to adhere to the CREW CT email policy which prohibits members from soliciting members with sales/ marketing emails.

<i>(select one)</i> <b>Member Type</b>	<b>Qualification</b>	<b>2018 dues</b>	<b>Mid-Year dues after 7/1/18</b>
Full	5+ years' experience	\$295	\$165
Associate	<5 years' experience	\$295	\$165
Civic	Local/regional gov't, public agency or educational	\$295	\$165
Retired	Good standing member for at least 5 years	\$200	\$165
Student	Undergraduates Only	\$90	\$90

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

### HOW TO SUBMIT:

>> **EMAIL COMPLETED, SIGNED APPLICATION AND CURRENT RESUME TO:**

Jenna Bennetti, Whittlesey PC - [jbennetti@wadvising.com](mailto:jbennetti@wadvising.com)

### THE FINE PRINT

*The Board of Directors votes in new members on a monthly basis, and you will be notified of the results within two weeks thereafter. You will be invoiced for membership dues upon approval of your application. Membership benefits will begin upon receipt of dues payment.*

- All 2018 CREW CT / CREW Network memberships expire December 31, 2018.
- CREW Memberships are held on an individual basis and are not transferable.
- Dues paid to CREW Network are not deductible as a charitable contribution for federal income tax purposes, but may be deductible as a business expense. Consult your tax advisor.
- CREW CT is a member organization of CREW Network. For further information, visit [www.crewnetwork.org](http://www.crewnetwork.org).