



KC CREW ASSOCIATE MEMBER
New Member Application
2010

Please TYPE or PRINT all information for use in the directory and database. **Return completed form, reference letters & check payable to Kansas City CREW in the amount of \$255.00 (less \$65.00 if between June 1 and September 30) to Julia Taylor, Sonnenschein Nath & Rosenthal LLP, 4520 Main Street, Suite 1100, Kansas City, MO 64111.** Reference letters must confirm your experience in your commercial real estate field from: 1) one current KC CREW Member, and (2) someone outside your place of employment.

Please note that to be an Associate KC CREW Member you must have 5 years or less of experience in your commercial real estate field.

Shaded areas to be completed by KC CREW:

Join Date: _____ **Member Organization (City):** _____

NAME: _____

COMPANY: _____

CATEGORIES: (Place a "1" or "2" next to the 2 categories under which you will be listed in the Membership Directory.)

Acquisitions	Construction	Institutional Lending	Property or Facilities Mgmt
Appraisal	Corp Real Estate	Intr Design/Site Planning	Sales
Architecture	Development	Law	Syndication
Asset Mgmt	Engineering	Leasing	Title/Escrow
Brokerage	Environmental	Marketing	Tenant Representation
Consulting	Finance	Mort Banking/Brokerage	

SPECIALTY: You may use a 35 character "Specialty" section to explain your area of real estate expertise (i.e. Law-urban development). This is in addition to the 2 Categories listed below. Please do not repeat your Category codes in your Specialty. Use the outlined spaces below to provide your specialty (blanks and punctuation count in the 35 character limit).

COMMITTEE AFFILIATION: (please check one)

Communications	Community Services	Membership
Programs	Golf Tournament	Sponsorship

FOR CREW OFFICE USE ONLY:

Received: _____ **Paid:** _____ **To Database:** _____

CREW



NETWORK

CREW Network Member Data

First Name:		Middle:		Last Name:	
Prefix:		Nickname:		Tag: (MAI, JD, CPA,)	
Title:			Years of Experience in Commercial Real Estate:		
Company Name:					
Address:					
City:		State/Province:		Zip/Postal Code:	
Email:				Cell Phone:	
Work Phone:		Direct Dial:		Fax:	

*Specialty: _____		*Information in this space describes your area of specialization. Please select one primary area of expertise for listing and indexing in the directory.	
Accounting Acquisitions / Dispositions Administration Appraisal Architecture Asset Management Brokerage Business Development Commercial Lending	Construction Consulting Corporate Real Estate Economic Development Education Engineering Environmental Planning Facility Management Finance	Interior Design /Space Planning Investment Management Investor Relations Land Use Planning / Zoning Law Market Research Marketing News/Journalism (Commercial Real Estate)	Personnel/HR Property Management Public Relations Public Sector Quasi-Governmental Transportation / Port Authorities Real Estate Development Relocation Services Title/Escrow

Other Commercial Real Estate Affiliations (circle):									
BOMA	ICSC	IREM	NAIOP	AI	CCIM	ULI	CORENET	SIOR	
*OTHERS: _____					*You may list others, but only those above will be indexed.				

OPTIONAL FIELDS:	
GENDER: F M	Race:
Secondary Company Name/Address/Phone:	
Home Phone:	Home Address:

FOR CHAPTER USE ONLY:	
CHAPTER: _____	Approval Authorized By: _____ Date: ___/___/___
NEW MEMBER: Y N Category: _____	CREW NETWORK TO INVOICE?: Y N \$ _____
Inaugural YEAR: _____	Membership Expiration Date: 12/31/_____