



COMMERCIAL REAL ESTATE WOMEN OF LAS VEGAS  
P.O. Box 97873  
Las Vegas, NV 89193-7873  
(702) 798-5156  
FAX (702) 798-8653

## 2025 NEW MEMBER APPLICATION PACKET

### QUALIFICATIONS FOR MEMBERSHIP:

To be eligible for CREW Las Vegas, you must meet one of the following:

Full Member: 5 or more years experience in primary discipline of commercial real estate in a decision-making capacity

Associate Member: More than 1 year, but less than 5 years experience in primary discipline of commercial real estate.

Affiliate Member: 1 or more years of experience in commercial real estate support industry (i.e. landscape service, advertising, marketing, janitorial or journalism)

Student Member: Student must be enrolled full-time in a college or university program, pursuing undergraduate education intended to lead to a career in one of the defined CREW fields of commercial real estate.

### MEETINGS/SPONSORSHIP:

Each applicant must have attended one CREW Las Vegas event during the previous 12 months or be sponsored by two active members.

### MEMBERSHIP DUES:

The dues for 2025, which includes membership in both the local and national organization, are as follows: Full and Associate Members - \$425, (\$335 after July 1); Affiliate Members - \$545 (\$465 after July 1); Student - \$229. All membership applications are subject to approval by the CREW Las Vegas Board. Upon approval by the Board, you will receive an invoice for membership dues. Please do not send payment before then.

Thank you for your interest in CREW Las Vegas. Please feel free to contact us at 702-798-5156 or [tara@amnevada.com](mailto:tara@amnevada.com) if you have any questions, or visit our website at [www.crewlv.org](http://www.crewlv.org).

Attachments:

1. CREW 2025 New Member Application
2. CREW Network Member Information Form

*Please note that CREW Las Vegas and CREW Network memberships stay with the individual. Memberships cannot be transferred if a company's employee changes during the membership term.*

To expedite consideration of your application, please send the attached completed forms to:

CREW Las Vegas  
[tara@amnevada.com](mailto:tara@amnevada.com)



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## 2025 NEW MEMBER APPLICATION

Name: \_\_\_\_\_  
Last First Initial Informal Name

Title: \_\_\_\_\_ Company: \_\_\_\_\_

No. of years in Commercial Real Estate: \_\_\_\_\_

Do you have a Real Estate License? \_\_\_\_\_

Do you have any other professional designation? If so, please list. \_\_\_\_\_

Membership designation requested: Full ☐ Associate ☐ Affiliate ☐

On which committee(s) do you wish to serve this year? (check all that apply)

Membership ☐ Sponsorship ☐ Programs ☐ Marketing/Media ☐ Finance ☐ Social ☐

CREW Cares ☐ Golf Tournament ☐ CREW LV Careers ☐ Special Event ☐

What is your company's specialty?

\_\_\_\_\_

Please provide or attach a brief bio of yourself and a description of your business.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Personal Information (Hobbies, sports, other interests):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### SIGNATURES

Applicant

Date

Each applicant must have attended one CREW Las Vegas event during the previous 12 months **or** be sponsored by two active members.

(Member Sponsor - Sign & Print)

Date

(Member Sponsor - Sign & Print)

Date

*Helping to advance women in all aspects of commercial real estate through educating, leading, networking & partnering.*

## CREW Network Member Data Sheet



Prefix:	Name:	Tag: <small>(MAI, JD, CPA, etc.)</small>
Chapter:		Membership Category:

### Contact Information

Company Name:		Title:	
Business Address:			
City:		State/Province:	Postal Code:
Email:		License # <i>(optional)</i> :	
Work Phone:	Cell Phone:	Alt. Email:	

### 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. <b>NOTE: up to ten searchable values for your personal specialty can be added from your CREWbiz profile online.</b>			
<input type="checkbox"/> Accounting <input type="checkbox"/> Asset Management <input type="checkbox"/> Construction Mgmt / General Contracting <input type="checkbox"/> Economic Development <input type="checkbox"/> CRE Executive <input type="checkbox"/> Interior Design / Space Planning <input type="checkbox"/> Land Use Planning and Zoning <input type="checkbox"/> Property Management <input type="checkbox"/> Relocation Services, Corporate	<input type="checkbox"/> Acquisitions / Dispositions <input type="checkbox"/> Brokerage <input type="checkbox"/> CRE Consulting <input type="checkbox"/> Education <input type="checkbox"/> Facility Management <input type="checkbox"/> Investment Mgmt. <input type="checkbox"/> Law <input type="checkbox"/> Public Sector <input type="checkbox"/> Risk Management	<input type="checkbox"/> Appraisal <input type="checkbox"/> Commercial Insurance <input type="checkbox"/> Corporate Real Estate <input type="checkbox"/> Engineering <input type="checkbox"/> Finance <input type="checkbox"/> Investor Relations <input type="checkbox"/> Market Research <input type="checkbox"/> Quasi-Governmental Trans. & Port Authority <input type="checkbox"/> Title / Escrow	<input type="checkbox"/> Architecture <input type="checkbox"/> Commercial Lending <input type="checkbox"/> Cost Segregation <input type="checkbox"/> Environmental <input type="checkbox"/> CRE Human Resources <input type="checkbox"/> Land Surveying <input type="checkbox"/> Program Management / Project Management <input type="checkbox"/> Real Estate Development 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: <small>(incl. city, st, zip)</small>			Home Phone: