APPLICATION FOR REALTOR® MEMBERSHIP

I hereby apply for REALTOR® Membership in the (please check the applicable association box)

____ REALTORS® of Central Colorado, Inc. (My Primary REALTOR® Association)

____ REALTORS® of Central Colorado, Inc. (My Secondary REALTOR® Association)

I understand that my dues will be returned to me in the event of non-election and that the application fee is nonrefundable. I will attend orientation, as prescribed in the Membership Policies of the Association as soon as possible after the confirmation of my membership. Failure to meet this requirement may result in having my membership terminated. In the event of my election, I agree to abide by the Code of Ethics of the NATIONAL ASSOCIATION OF REALTORS®, which includes the duty to arbitrate (or to mediate if required by the association) and the Constitution, Bylaws and Rules and Regulations of the above named Association, the State Association and the National Association, and if required, I further agree to satisfactorily complete a reasonable and non-discriminatory written examination on such Code, Constitutions, Bylaws and Rules and Regulations. I understand membership brings certain privileges and obligations that require compliance. Membership is final only upon approval by the Board of Directors and may be revoked should completion of requirements, such as orientation, not be completed within timeframe established in the association's bylaws. I understand that I will be required to complete periodic Code of Ethics training as specified in the association's bylaws as a continued condition of membership.

NOTE: *Applicant acknowledges that if accepted as a member and he/she subsequently resigns from the Association or otherwise causes membership to terminate with an ethics complaint pending, the Board of Directors may condition renewal of membership upon applicant's certification that he/she will submit to the pending ethics proceeding and will abide by the decision of the hearing panel. If applicant resigns or otherwise causes membership to terminate, the duty to submit to arbitration continues in effect even after membership lapses or is terminated, provided the dispute arose while applicant was a REALTOR®.*

* Amount shown is prorated according to month joining unless membership was held the previous year. I hereby submit the following information for your consideration:

PERSONAL INFORMATION:					
First Name		Middle Name			
Last Name		Suffix: Jr, III, Sr, Etc.			
Nickname (DBA):					
Date of Birth:					
Home Address:					
City:		State:		Zip:	
Home Phone:		Cell Phone:			
Personal Fax:					
E-mail Address:					
Secondary E-mail:					
Real Estate License #					
Licensed/Certified Appraiser: Yes ___ No ___		Appraisal License #			

PREFERRED MAILING/CONTACT INFORMATION:					
Initial Password for Association Site(s) (if applicable):					
Preferred Phone: ____ Home ____ Office ____Cell					
Preferred E-mail: ____ Primary E-mail ____ Secondary E-mail					
Preferred Mailing: _____ Home ____ Office ____Other					
Mail Publications to: ____Home ____ Office ____Other					
Other Mailing Alternate:					
Address:					
City:		State:		Zip:	
Applicant Website Address:					

COMPANY INFORMATION:	**IS THIS IS A NEW FIRM IN THIS ASSOCIATION** Yes ____ No ____		
Office Name:			
Office Address, City, State, Zip			
Employing Broker			
Office Manager			
Company R/E License #			
Firm Website Address:			
Office Phone:		Fax:	

APPLICANT INFORMATION:						
Are you presently a member of any other Association of REALTORS®? Yes ____ No ____						
If yes, name of Association						
Have you previously held membership in any other Association of REALTORS®? Yes ____ No ____						
If yes, name of Association						
Have you been found in violation of the Code of Ethics or other membership duties in any Association of						
REALTORS® in the past three (3) years or are there any such complaints pending? Yes ____ No ____						
(If yes, provide details.)						
If you are now or have ever been a REALTOR®, indicate your NAR						
membership (NRDS) #						
Last date (year) of completion of NAR's Code of Ethics training requirement:						
Have you ever been refused membership in any other Association of REALTORS®? Yes ____ No ____						
If yes, state the basis for each such refusal and detail the circumstances related thereto:						
Is the Office Address, as stated, your principal place of business? Yes ____ No ____						
If not, or if you have any branch offices, please indicate and give address:	Address:					
	City:		State:		Zip:	
Do you hold, or have you ever held, a real estate license in any other state? Yes ____ No ____						
If so, where:						
Have you or your firm been found in violation of state real estate licensing regulations or other laws						
prohibiting unprofessional conduct rendered by the courts or other lawful authorities within the last three						
years? Yes ____ No ____						
If yes, provide details:						
Have you or your firm been convicted of a felony or other crime? Yes ____ No ____						
If yes, provide details:						

I hereby certify that the foregoing information furnished by me is true and correct, and I agree that failure to provide complete and accurate information as requested, or any misstatement of fact, shall be grounds for revocation of my membership if granted. I further agree that, if accepted for membership in the Board, I shall pay the fees and dues as from time to time established. **NOTE:** Payments to the REALTORS® of Central Colorado are not deductible as charitable contributions. Such payments may, however, be deductible as an ordinary and necessary business expense. No refunds.

By signing below I consent that the REALTOR® Associations (local, state, national) and their subsidiaries, if any (e.g., MLS, Foundation) may contact me at the specified address, telephone numbers, fax numbers, email address or other means of communication available. This consent applies to changes in contact information that may be provided by me to the Association(s) in the future. This consent recognizes that certain state and federal laws may place limits on communications that I am waiving to receive all communications as part of my membership.

Signature: _____ Dated: _____

Employing Broker's Signature: _____ Dated: _____

MLS Participation Agreement

(Sign and Date if requesting access to the MLS system)

I agree as a condition of participation in the MLS to abide by all relevant bylaws, rules and regulations and other obligations of participation, including payment of fees. I further agree to be bound by the Code of Ethics on the same terms and conditions as board/association members, as established in the *Code of Ethics and Arbitration Manual,* including the obligation to submit to ethics hearings and the duty to arbitrate contractual disputes with other REALTORS® in accordance with the established procedures of the board/association. I understand that a violation of the Code of Ethics may result in suspension or termination of MLS rights and privileges and that I may be assessed an administrative processing fee not to exceed $500 which may be in addition to any discipline, including fines, that may be imposed.

Signature: _____ Dated: _____

Employing Broker's Signature: _____ Dated: _____

Please indicate a desired password for MLS access:

Password: 6-8 letters or numbers: _____

NOTE: MLS Fees will be billed to your employing Broker Monthly.