

## **APPLICATION FOR MLS AFFILIATE MEMBERSHIP**

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

- \_\_\_\_\_ REALTORS® of Central Colorado, Inc. (My <u>Primary REALTOR®</u> Association)
- \_\_\_\_\_ REALTORS® of Central Colorado, Inc. (My <u>Secondary</u> 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 (D	BA):							
Date of Birth:	:							
Home Addres	ss:							
City:	State:						Zip:	
Home Phone:				Cell Phone:				
Personal Fax:				·				
E-mail Addre	E-mail Address:							
Secondary E-mail:								
Real Estate License #								
Licensed/Certified Appraiser: Yes No Appraisal License #								

PREFERRED MAILING/CONTACT INFORMATION:							
Desired Password for Association Site (Otherwise, this will be your last name.):							
Preferred Phone: Home OfficeCell							
Preferred E-mail: Primary E-mail Secondary E-mail							
Preferred Mailing: Home OfficeOther							
Mail Publications to:HomeOfficeOther							
Other Mailing Alternate:							
Address:							
City: State: Zip:							
Applicant Website Address:							

<b>COMPANY INFORMATION</b>	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	B? Yes N	D			
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 C	ode of Ethi	cs or other memb	ership duties in a	ny Association	ı of		
REALTORS® in the past three (3) years of	or are there	any such compla	ints pending? Ye	s No			
(If yes, provide details.)							
If you are now or have ever been a REAL	TOR®, ind	icate your NAR					
membership (NRDS) #							
Last date (year) of completion of NAR's G	Code of Eth	ics training requi	rement:				
Have you ever been refused membership i				es No			
If yes, state the basis for each such refusal	and detail	the circumstance	s related thereto:				
Is the Office Address, as stated, your princ	cipal place	of business? Yes	No				
If not, or if you have any branch offices,	Address:						
please indicate and give address:	City:		State:	Zip:			
Do you hold, or have you ever held, a real	estate licer	nse in any other s	tate? Yes	No			
If so, where:							
Have you or your firm been found in viola	tion of stat	e real estate licen	sing regulations of	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 Chaffee County Board of REALTORS® or the San Luis Valley Board of REALTORS 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.

Dated:			
Dated			
	Dated: 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<sup>®</sup> 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: \_\_\_\_\_

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