

Membership Application

Please type or print; complete all applicable spaces. All areas in bold are required information.

Name: (as it appears on your license) _____ Nickname: _____
License #: (attach copy) _____ License Type: _____ License Expiration Date: _____
Home Address: _____ City: _____ State: _____ Zip: _____
Would you prefer mail to be sent to: _____ Office or _____ Home
Preferred Phone: () _____ Circle one: Business Home Cell Other
E-Mail Address: _____ Birth Date: _____
Social Security #: _____

Firm Name: _____ Firm Phone: () _____
Firm Address: _____ City: _____ State: _____ Zip: _____
Firm Fax #: _____ Firm E-Mail/Internet Address: _____
Firm/Branch Office Principal/Managing Broker: _____

Have you ever been a member of a REALTOR® Association? Yes No
(If yes, please list Association.) _____
Do you currently have pending ethics violations filed against you? Yes No
Have you been found in violation of the REALTOR® Code of Ethics (in the past three years) Yes No

Please Indicate Your Specialties:

- | | | |
|---|---|---|
| <input type="checkbox"/> Residential Sales (Existing Homes) | <input type="checkbox"/> Farm & Estates | <input type="checkbox"/> Appraisal |
| <input type="checkbox"/> Residential Sales (New Construction) | <input type="checkbox"/> Land Sales | <input type="checkbox"/> Property Management |
| <input type="checkbox"/> Commercial Sales/Leasing/Development | | <input type="checkbox"/> Other (Please explain) |

VAR Specialty Councils: Please check which VAR councils you would like to join.

- Commercial Property Management Relocation Council

VAR Specialty Groups: Check if you want more information about membership for a small fee in the:

- Appraisal Group International Group

VAR Advocacy Groups:

- Public Policy AG Group Risk Mgt. AG Group Prof. Dev. AG Group Information Mgt. AG Group

I, _____ hereby apply for: Primary Secondary
REALTOR® membership in the _____ Association of REALTORS®. Enclosed is my check in the amount of
\$ _____ which is to be returned to me in the event of non-election.

If my application is approved, I agree as a condition of membership to complete the indoctrination course of the _____ Association, if any, and otherwise on my own initiative to thoroughly familiarize myself with the Code of Ethics of the National Association of REALTORS®, including the duty to arbitrate business disputes in accordance with the Code of Ethics and Arbitration Manual of the Association and the Constitution, Bylaws and Rules and Regulations of the above named association, the State Association and the National Association. I further agree to complete satisfactorily a reasonable and nondiscriminatory written examination covering such Code, Constitutions, Bylaws, Rules and Regulations, and to duly arbitrate. I further agree that my act of paying dues shall evidence my initial and continuing commitment to abide by the aforementioned Code of Ethics, Constitution, Bylaws, Rules and Regulations, and duty to arbitrate, all as from time to time amended.

Finally, I _____ authorize the _____ Association, through its Membership
(Applicant's Name) (Name of Association)

Committee or otherwise to invite and receive information and comment about me from any Member or other person, and I agree that any information and comment furnished to the Association by any Member or other person in response to any such inquiry shall be conclusively deemed to be privileged and not form the basis of any action by me for slander, libel or defamation of character.

NOTE: Applicant acknowledges that if accepted as a Member and he/she subsequently resigns or is expelled from membership in the Association with an ethics complaint or arbitration request pending, the Board of Directors may condition renewal of membership upon applicant's verification that he/she will submit to pending ethics or arbitration proceeding and will abide by the decision of the Hearing Panel; or, if applicant resigns or is expelled from membership without having complied with an award in arbitration, the Board of Directors may condition the renewal on his/her payment of the award, plus any costs that have previously been established as fee and payable in relation thereto, provided that the award and such costs have not, in the interim, been otherwise satisfied.

Signature of Applicant: _____ Date: _____
I confirm that I have read and understand this application and that all the information provided is true and correct to the best of my knowledge.

MEMBERSHIP/ DUES INFORMATION (Local/State Association Use Only)

Transaction Type: Add Transfer Upgrade Start/Upgrade Date: _____
Member Type: _____ (DR- Designated REALTOR®/ AB- Associate Broker/ RM-REALTOR®/ NS-Non-Member
Salesperson/ IA-Institute Affiliate/ SE-Secondary Member/ OD-Out of State/ OR- Out of State RM)
Applicant's NRDS ID #: _____ Firm's NRDS ID #: _____ Assoc. NRDS ID #: _____
NAR Dues: \$ _____ VAR Dues: \$ _____ VAR Issues & Mobilization: \$ _____
VAR Capital Replacement: \$ _____ VAR New Member Processing: \$ _____
Local Association Dues: \$ _____ Other: \$ _____ Total: \$ _____