



Return completed form to membership@cparfl.com

APPLICATION FOR MEMBERSHIP
CENTRAL PASCO ASSOCIATION OF REALTORS®

- Primary Membership
Secondary Membership

www.CPARFL.com

SECTION I

I, _____ hereby apply for REALTOR® Membership in the CENTRAL PASCO ASSOC. OF REALTORS®, and enclose my payment for the required dues and fee which I understand will be returned to me in the event I am not accepted to membership, less a processing fee of \$25.00. In the event my application is approved, I agree as a condition to membership to complete the indoctrination course and otherwise on my own initiative to thoroughly familiarize myself with the Code of Ethics of the NATIONAL ASSOCIATION OF REALTORS®, and the Constitutions, Bylaws, and Rules and Regulations of the CENTRAL PASCO ASSOC. OF REALTORS®, the Florida Association and the National Association of REALTORS®. I further agree to complete satisfactorily a reasonable and nondiscriminatory written examination covering such Code, Constitutions, Bylaws, Rules and Regulations, and duty to 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, Constitutions, Bylaws, Rules and Regulations, and any duty to arbitrate, all as from time to time amended. Finally, I consent and authorize the Association, through its' Membership 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 invitation shall be conclusively deemed to be privileged and not from 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 the 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 renewal of membership from his/her payment of the award plus any cost that have previously been otherwise satisfied.

I hereby submit the following information for your consideration (please print):

Name as shown on License: _____

License No. _____ [] Broker [] Broker-Associate [] Salesperson

Date of Florida Licensure: _____ (Mon.)(Day) (Year) NRDS No. /MLX Access No.: _____ (If Applicable)

Home Address _____ City/State/ZIP _____

Home Phone _____ Home Fax _____

Preferred Email _____ Mobile Phone _____

Birth date: _____ (Month) (Day)

Preferred Mailing Address: Home [] Office [] Preferred Phone: Home [] Mobile [] Office []

Name of Office: _____

Office Address: _____

Office Phone _____ Office Fax _____ Office Email: _____

What Board of Realtors is your Broker a primary member? _____

Secondary member? _____

You position with Firm: [] Realtor/Independent Contractor [] Employee [] other [] Principal [] Partner [] Corporate Officer [] Office Manager

Were you referred by a CPAR Member? If yes, please print name: _____

I agree that, if accepted for Membership in the Association, I shall pay the fees and dues as from time to time established. I will fill out this entire form (pages 1 thru 4) to the best of my knowledge and sign where indicated on pages 1, 3 & 4.

Dated _____, 20____. Signed: _____

SECTION II

Do you hold, or have you ever held, a real estate license in any other state? YES NO If so, specify below:

Are you currently a primary member of any other Board of Realtors® in the State of Florida? YES NO
If "YES", please provide the name of the Board of Realtors®: _____

Has your real estate license, in this or any other state, been suspended or revoked? YES NO If "YES", specify the place (s) of such action, and detail the circumstances relating thereto*:

Are there now any pending or unresolved complaints, or have there been within the past five (5) years, any complaints against you or the firm with which you have been associated before any state real estate regulatory agency or any other agency of government?
YES NO If "YES", specify the substance of each complaint in each state, the agency before which the complaint was made, and the current status or resolution of such complaint*:

Have you ever been convicted of a felony? YES NO If so, give details including state and court of conviction*:

SECTION III (PERSONAL DATA)

Information supplied under SECTION III will assist the Association in establishing historical data regarding members. Information furnished under SECTION III will not be used in evaluating an applicant's qualifications for membership.

Place of Birth

(City or County) (State) (Country)

Have you been continuously engaged in the real estate business since obtaining your license? YES NO

If not, during what years were you not actively practicing real estate? _____

How many years have you been active in the real estate profession? _____

As: Salesperson Broker Other: _____

what phase of real estate do you specialize?

In what other business have you been engaged? _____

From _____ to _____ at _____
(City) (State)

Have you participated in a Multiple Listing Service? YES NO

Where? _____
(City) (State)

Have you ever served in the Military? YES NO

List the name of the Association committees which you would be interested in serving on (e.g., Multiple Listing, Professional Standards, Fair Housing, Finance, Political Affairs, etc.)

Are you now employed or engaged in any other business or profession? YES NO If "Yes", what is it?

(Position) (Location – City & State)

*Attach separate sheet (s) as required.

SECTION IV

Only applicants for REALTOR® or Nonresident Membership who are principals, partners, corporate officers or individuals in positions of management control on behalf of individuals who are not physically present and engaged in the real estate profession in connection with the firm's office located within the jurisdiction of the Association (e.g., Branch Office Managers) must complete the following section:

State the names and titles of all other principals, partners, or corporate officers of your firm:

(Name) (Title)

(Name) (Title)

(Name) (Title)

Is the Office Address, as stated in SECTION I, your principal place of business? YES NO

List the name and address of all branch offices or other real estate firms in which you are a principal, partner or corporate officer within the jurisdiction of the Association:

(Name) (Address)

(Name) (Address)

(Name) (Address)

Are you or is any real estate firm in which you are a sole proprietor, general partner or corporate officer involved in any pending bankruptcy or insolvency proceedings or have you or any real estate firm in which you are a sole proprietor, general partner or corporate officer been adjudged bankrupt in the past three (3) years? YES NO

If "YES", specify the place (s) and date (s) of such action, and detail the circumstances relating thereto*:

NOTE: Applicant acknowledges that, if the applicant or any real estate firm in which the applicant is a sole proprietor, general partner, or corporate officer is involved in any pending bankruptcy or insolvency proceedings or has been adjudged bankrupt in the past three (3) years, the Association may require as a condition of membership that the bankrupt applicant pay cash in advance for Association and MLS fees for up to one (1) year from the date that membership is approved or from the date that the applicant is discharged from bankruptcy (whichever is later) or, in the event that bankruptcy proceedings are initiated subsequent to obtaining membership in the Association, that the member be placed on a "cash basis" from the date that bankruptcy is initiated until one (1) year from the date that the member has been discharged from bankruptcy.

SECTION V

(ALL applicants must sign)

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, may be grounds for revocation of my membership, if granted.

I further acknowledge that I have received a copy of the following documents which are attached to and made a part of this Application for Membership:

- Schedule of Primary Membership Dues to Central Pasco Association of Realtors®
- SUPRA Key/Lockbox Information (when applicable)

PLEASE NOTE: Orientation class, which covers ethics as well as other pertinent information regarding your becoming a REALTOR®, is required of all new members. Orientation for the Central Pasco Assoc. of Realtors takes place at the CPAR office at 2009 Osprey Lane Lutz, FL 33549 or are available on-line through Realtor.org.

Upon acceptance of your membership application, you will receive notification when your orientation class has been scheduled and information as to what you will need to bring with you for your orientation class.

Signed _____ (Date) _____
(Applicant's Signature)



CREDIT CARD AUTHORIZATION FORM

You are authorizing charges to your credit card for both your Central Pasco Association of Realtors dues and activation of a Supra (lockbox access) account.

PLEASE INDICATE YOUR PREFERENCE BY INITIALING REGARDING A SUPRA ACCOUNT.

_____ I'm requesting a Supra Account

_____ I **DO NOT** want a Supra account at this time

Cardholders Name: _____

Card Billing Address: _____

Card Billing City, State & Zip Code: _____

NRDS# or License #: _____

Office Name: _____

Contact Phone #: _____

Email: _____

Credit Card #: _____

Expiration Date: _____ Security Code: _____

Card Holders Signature: _____