



**AGENT APPLICATION DATA SHEET**  
ALL INFORMATION IS REQUIRED – PLEASE PRINT LEGIBLY

Name: \_\_\_\_\_  
AS SHOWN ON REAL ESTATE LICENSE

Today's Date: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Gender:  Male  Female

Home Address: \_\_\_\_\_  
\_\_\_\_\_

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Main Phone # (to appear on listings): \_\_\_\_\_

Email Address: \_\_\_\_\_

RE License Number: \_\_\_\_\_

NRDS Number: \_\_\_\_\_

Do you currently or have you EVER belonged to another Association?  Yes  No

If yes, where? \_\_\_\_\_  Current Member

Do you wish Kingman/Golden Valley Association of REALTORS® to be your PRIMARY Association?  Yes  No

If Secondary, name of Primary Association: \_\_\_\_\_

Preferred Mailing Address:  Home  Office

**For WARDEX Access**

User Name (up to 8 characters): \_\_\_\_\_

Password: \_\_\_\_\_  
(the first time you log in, you will be prompted to update your password)

**FIRM/OFFICE INFORMATION**

Firm/Office Name: \_\_\_\_\_

Office Address: \_\_\_\_\_  
\_\_\_\_\_

Office Phone: \_\_\_\_\_

Office Fax: \_\_\_\_\_

Date Hired by Firm: \_\_\_\_\_

NOTE: ONCE ALL REQUIRED SIGNATURES HAVE BEEN OBTAINED, PLEASE SUBMIT TO KGVAR



**APPLICATION FOR AGENT MEMBERSHIP**  
ALL INFORMATION IS REQUIRED – PLEASE PRINT LEGIBLY

**SECTION I**

Applicants for Primary or Secondary Membership are required to complete all Sections below.

To: **KINGMAN/GOLDEN VALLEY ASSOCIATION OF REALTORS®**

\_\_\_\_\_  
(Applicant's Name – Please Print)

**Provide all addresses and phone numbers. Check boxes for primary contacts:**

Home Address: \_\_\_\_\_  
\_\_\_\_\_

Home Phone: \_\_\_\_\_  Cell Phone: \_\_\_\_\_

Office Address: \_\_\_\_\_  
\_\_\_\_\_

Office Phone: \_\_\_\_\_

I hereby apply for REALTOR® Primary or Secondary Membership in the Kingman/Golden Valley Association of REALTORS® (hereinafter KGVAR), and enclose my check for \$\_\_\_\_\_ which I understand will be returned to me in the event I am not accepted for Membership. In the event my application is approved, I agree as a condition to Membership to complete the New Member Orientation course of the KGVAR. I also agree to otherwise, and on my own initiative, 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 Arizona Association of REALTORS® and the Bylaws, and Policy Statements of the KGVAR, the Arizona Association of REALTORS®, and the National Association of REALTORS®. I further agree to complete satisfactorily a reasonable and nondiscriminatory written examination covering such Code, constitution, 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, constitution, bylaws, rules and regulations, and duty to arbitrate, all as from time to time amended. Finally, I consent and authorize the KGVAR, through its Member Services 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 form the basis of any action by me for slander, libel, or defamation of character.

**NOTE:** Applicant acknowledges that the Association will maintain a Membership file of information, which will be shared with WARDEX and may be shared with other Boards/Associations where the applicant subsequently seeks Membership. This file shall include: previous applications for Membership; all final findings of Code of Ethics violations of other Membership duties within the past three (3) years; pending complaints alleging violations of the Code of Ethics or alleging violations of other Membership duties; incomplete or pending disciplinary measures; pending arbitration requests; and information related to unpaid arbitration awards or unpaid financial obligations to the Association or WARDEX.

**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®.

**NOTE:** Dues payments to the Association are not tax deductible as charitable contributions. Portions of such payments may be tax deductible as ordinary and necessary business expenses.

**SECTION I (cont.)**

I hereby submit the following information for consideration:

Name (AS SHOWN ON REAL ESTATE LICENSE):

\_\_\_\_\_  
(Please Print)

Nickname: \_\_\_\_\_

RE License Number: \_\_\_\_\_ State: \_\_\_\_\_

License Type:  Salesperson  Other \_\_\_\_\_

Name of Firm/Office: \_\_\_\_\_

Firm/Office Address: \_\_\_\_\_  
\_\_\_\_\_

Position with Firm:  Branch Office Manager  Employee  Independent Contractor  Other

If other, please explain: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Website: \_\_\_\_\_

I agree that, if accepted for Membership in the Association, I will pay the fees and dues as established.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**SECTION II**

Are you currently a Member of another Board or Association, which is affiliated with the NATIONAL ASSOCIATION OF REALTORS® or have you previously held Membership in another Board or Association (within the past 3 years)?

Yes  No

If "yes", please list each Board and Association where Membership was held, type of Membership held, and approximate dates of Membership.

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

Have you participated in a multiple listing service (MLS), which is owned and operated by a Board or Association affiliated with the NATIONAL ASSOCIATION OF REALTORS® within the past three (3) years?

Yes  No

**SECTION II (cont.)**

If "yes", please list the name of each MLS and the approximate dates of participation.

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Do you hold, or have you EVER held, a Real Estate license?     Yes         No

If "yes", please specify license number and state of issuance:

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Has your Real Estate license, in this or any other state, been suspended or revoked?     Yes         No

If "yes," please specify the place(s) and date(s) of such action, and detail, the circumstances relating thereto (attach separate sheet if necessary):

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Are there now, or have there been within the past 3 years, any pending or unresolved complaints, 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, (attach separate sheet if necessary):

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Have you ever been convicted of a felony?     Yes         No

If "yes", please give details including state and court of conviction (attach separate sheet if necessary):

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I hereby certify that the foregoing information furnished 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.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**SECTION III**

Information supplied will assist the Association in establishing historical data regarding its Members. Information furnished under Section III is voluntary and will not be used in evaluating an applicant's qualifications for Membership.

Date of birth: \_\_\_\_\_  
(mm/dd/yyyy)

Highest level of education completed: \_\_\_\_\_

First entered the Real Estate business on \_\_\_\_\_, at \_\_\_\_\_  
(Date) (City) (State)

Have you been engaged continuously in the Real Estate business since then?  Yes  No

If not, during what years were you in the Real Estate business? \_\_\_\_\_

How many years have you been active in the Real Estate profession? \_\_\_\_\_ Salesperson \_\_\_\_\_ Broker \_\_\_\_\_ Other

In what area(s) of Real Estate do you specialize? ):  
\_\_\_\_\_  
\_\_\_\_\_

In what other business(es) have you been engaged?

\_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_, at \_\_\_\_\_  
(City, State)  
\_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_, at \_\_\_\_\_  
(City, State)  
\_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_, at \_\_\_\_\_  
(City, State)

First licensed in Arizona on \_\_\_\_\_  
(Month, Year)

List the names of committee(s) on which you would be interested in serving (e.g., Governmental Affairs, Education, Member Services, Affiliates, Community Outreach, etc.):

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

Are you now employed by or engaged in any other business or profession?  Yes  No

If "yes", please list: \_\_\_\_\_  
(Position and Location)

**SECTION III (cont.)**

Are you now a Member of, or have you ever been a member of, a Real Estate Board or Association not affiliated with the NATIONAL ASSOCIATION OF REALTORS®?

Yes       No

If “yes”, please list the name of each such Board or Association, the type of Membership held, and the dates establishing the period during which membership have been held:

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\*Adopted by Board of Directors—April 1985  
\*Amended by Board of Directors—February 1991  
\*Amended by Board of Directors—November 1993  
\*Amended by Board of Directors—May 1999  
\*Amended by KGVAR—December 2007  
\*Amended by KGVAR—September 2016

# WARDEX New User Activation

Member Association: BULLHEAD CITY KINGMAN LAKE HAVASU CITY

NON-MEMBER ASSOCIATION \_\_\_\_\_

Date of Activation: \_\_\_\_\_ Fee attached: \_\_\_\_\_

Member/assistant Name: \_\_\_\_\_

MANDATORY: User ID#: REALTORS® = NRDS # \_\_\_\_\_ License# \_\_\_\_\_

Admin = a \_\_\_\_\_ (first initial of first name and first 3 initials of last name)

Personal Assistant = p \_\_\_\_\_ (first initial of first name and first 3 initials of last name)

Member Address: \_\_\_\_\_

Member Type: \_\_\_\_\_

Firm Name: \_\_\_\_\_

Firm Address: \_\_\_\_\_

Primary E-Mail Address \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Home phone (optional) \_\_\_\_\_

Office Phone: \_\_\_\_\_ Office Fax: \_\_\_\_\_

Listing privileges Y/N: \_\_\_\_\_ If N Broker signature is required: \_\_\_\_\_

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## STAFF use only

Duplicate log-in Y/N: \_\_\_\_\_

Received Date: \_\_\_\_\_ STAFF initials \_\_\_\_\_

Assign: Login ID: \_\_\_\_\_ Password: \_\_\_\_\_

**Fax to WARDEX at 928-220-9704**  
**or email to [support@wardex.net](mailto:support@wardex.net)**

**Western Arizona REALTOR® Data Exchange (WARDEX)**  
**Service Subscriber Agreement** (rev.1-20-2016)

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I, \_\_\_\_\_, REALTOR® as an independent agent or employed by the Real Estate Firm of \_\_\_\_\_ request subscription in the WESTERN ARIZONA REALTOR® DATA EXCHANGE (hereinafter referred to as WARDEX or "SERVICE"). NAME CHANGES REQUIRE A NEW SERVICE SUBSCRIBER AGREEMENT FOR REVIEW AND WRITTEN APPROVAL.

In requesting subscription, I agree to the user fees which are due and payable for individual services rendered, as set forth in the WARDEX fee schedule. It is further understood that the fees are not refundable.

As a Subscriber, I have read, understood and agree to abide by the SERVICE Bylaws and Rules and Regulation. In addition, I understand that the information obtained from the SERVICE is confidential and proprietary market information, which is available only to Participants and Subscribers of the SERVICE. I agree that I will not provide access to or information from the SERVICE to unapproved and/or licensed individuals, non-participating real estate licensees or members of the public at large. Violation of this provision is a violation of the WARDEX Rules and Regulations.

**All data submitted to the SERVICE becomes the property of WARDEX. As a Subscriber, I agree to utilize all data received by the SERVICE in accordance with the SERVICE Rules and Regulations. Subscriber is hereby notified that all data obtained from the SERVICE is federally copyrighted. Providing SERVICE information to unauthorized recipients may be a copyright violation. Any violation of said copyright will be prosecuted to the fullest extent of the law.**

As a Subscriber, I attest that I own the intellectual property rights or have entered into a license agreement for any and all photos or videos I enter into the system. Violation of this provision is a violation of the WARDEX Rules and Regulations.

**It is understood that IDX feeds require separate application and approval (reference WARDEX Internet Data Display Agreement).**

This Subscriber Agreement may be terminated upon written notice to the SERVICE and can be terminated by the SERVICE in accordance with its Rules and Regulation. Upon termination, I understand that all data from the SERVICE must be immediately destroyed; or said holder of said data will be in violation of the Federal Copyright.

DATE: \_\_\_\_\_

Subscriber printed name (type or print clearly): \_\_\_\_\_

Subscriber signature: \_\_\_\_\_

Designated Broker printed name (type or print clearly): \_\_\_\_\_

Designated Broker signature: \_\_\_\_\_

Firm name (type or print clearly): \_\_\_\_\_

Firm address (type or print clearly): \_\_\_\_\_