



MID CAROLINA REGIONAL ASSOCIATION OF REALTORS®

140 Turner Street, Southern Pines, NC 28387

910-692-8988 Membership@MCRAR.com Accounting@mcrar.com

Member Reinstatement Form

I hereby apply for the reinstatement of my Mid Carolina Regional of REALTORS® (MCRAOR) membership. Attached is my payment to MCRAOR in the amount of \$ \_\_\_\_\_. I agree to continue to abide by the Code of Ethics of the National Association of REALTORS® (NAR), which includes the duty to arbitrate, and the Constitutions, Bylaws and Rules and Regulations of MCRAOR, the State Association and the National Association.

Name as shown on license: \_\_\_\_\_

Residence Address: \_\_\_\_\_ (Street Address)

\_\_\_\_\_  
(City, State ZIP Code)

Phone Number: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

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

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

Type of License: [ ] Broker [ ] Licensed Appraiser

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

Designated REALTOR® Certification

\_\_\_\_\_ is now affiliated with my firm.  
(Name of Reinstated Member)

Effective Date of Reinstatement: \_\_\_\_\_

\_\_\_\_\_  
(Signature of New Designated REALTOR®)

\_\_\_\_\_  
(Signature of Reinstated Member)