



REALTOR®

APPLICATION FOR REALTOR® MEMBERSHIP

To the North Pulaski Board of REALTORS® (NPBOR), I hereby apply for REALTOR® Membership in the above-named Board and am enclosing my check in the amount of \$ _____ * for my dues and one-time application fees payable to North Pulaski Board of REALTORS®. I agree to abide by the Code of Ethics of the National Association of REALTORS®, which includes the duty to arbitrate, and the Constitution, Bylaws, and Rules and Regulations of the above-named Board, the State Association and the National Association. 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 the 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.

I acknowledge that as a member of NPBOR, I will be licensed to use the REALTOR® trademarks, and I agree to abide by the rules governing use of those trademarks. I understand that REALTOR® is a federally registered trademark of the National Association and use of this designation is subject to rules promulgated by the National Association. Upon termination of my membership with the Association for any reason, my license to use the term REALTOR® is automatically revoked and I will immediately discontinue use of the term REALTOR® and all REALTOR® trademarks. Information regarding the use of membership marks can be found at: https://www.nar.realtor/logos-and-trademarks-rules

* Amount shown is prorated according to month joining. I hereby submit the following information for your consideration:

Name _____
Real Estate License # _____
Licensed/certified appraiser Yes _____ No _____ Appraisal License # _____
Office Name _____
Office Address _____ City/State/Zip Code _____
Office Phone _____ Office Fax _____
Residence Address _____ City/State/Zip Code _____
Cell Phone _____ E-Mail _____
Additional Phone _____ Preferred Mailing Home _____ Office _____

Are you presently a member of any other Association of REALTORS®? Yes _____ No _____
If yes, name of Association _____

Have you previously held membership in any other Association of REALTORS®? Yes _____ No _____
If yes, name of Association _____

If you are now or have ever been a REALTOR®, indicate your NAR membership (NRDS) #: _____

Have you been found in violation of the Code of Ethics or other membership duties in any Association of REALTORS® or are there any complaints pending? Yes _____ No _____ (If yes, provide details as an attachment).

Are you a principal, partner, corporate officer, or branch office manager? Yes _____ No _____
If yes, you must also complete 2nd page of this application.

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 North Pulaski 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 information listed above or any 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.

Signature _____

Date _____

THIS SECTION TO BE COMPLETED ONLY BY DESIGNATED BROKERS/BRANCH MANAGERS APPLYING FOR MEMBERSHIP

Company information: Sole Proprietor Partnership Corporation LLC (Limited Liability Company)

Your position: Principal Partner Corporate Officer Branch Office Manager

Names of other Partners/Officers of your firm:

Have you ever been refused membership in any other Association of REALTORS®? [] Yes [] No

If yes, state the basis for each such refusal and detail the circumstances related thereto:

Is the Office Address, as stated, your principal place of business? [] Yes [] No

If not, or if you have any branch offices, please indicate and give address:

Do you hold, or have you ever held, a real estate license in any other state? [] Yes [] No

If so, where:

Have you or your firm been found in violation of state real estate licensing regulations within the last three years? If yes, provide details:

Have you or you firm been convicted, adjudged, or otherwise recorded as guilty by a final judgment of any court of competent jurisdiction of a felony or other crime. 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 North Pulaski 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: _____

Signature: _____