



Application For REALTOR® Membership

I hereby submit my application for a REALTOR® Membership in the above named Association and am enclosing payment for all accompanying fees and dues. Two payments in the amount of \$____.____ which includes the one-time ECAR new member setup fee of \$700.00 and the prorated national, state and local yearly dues and MLS fees in the amount of \$365.00 which includes the one-time new member setup fee of \$300.00 and my first month of MLS dues for the Elko County Association of REALTORS®S®. All monies, minus a prorated amount, will be returned to me in the event of non-election. In the event of my election, I agree to abide by the Code of Ethics of the National Association of REALTORS®, which includes the duty to arbitrate, and the Policies, Bylaws and Rules and Regulations of the above named Board, the State Association and the National Association, and if required, I further agree to satisfactorily complete a reasonable and non-discriminatory written examination on such Code, Policies, Bylaws and Rules and Regulations. 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 and MLS classes 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.

_____ Applicant acknowledges that if accepted as a member and he/she subsequently resigns from the Board 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®.

I hereby submit the following information for your consideration:

Legal Name:

Real Estate License #: _____ Expiration Date: _____

Licensed/Certified Appraiser: Yes No Appraisal License #: _____

Office Name:

Office Address:



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Office Phone: _____ Office Fax: _____

E-Mail: _____

Residence Address:

Cell Phone: _____ Home Phone: _____

E-Mail: _____

Preferred Mailing: Home Office Preferred Phone: Cell Home

Are you presently a member of any other Association of REALTORS®? Yes No

If yes, name of Association and type of membership held:

Have you previously held membership in any other Association of REALTORS®? Yes No

If yes, name of Association and type of membership held:

Have you been found in violation of the Code of Ethics or other membership duties in any Association of REALTORS® in the past three (3) years or are there any such complaints pending? Yes No

If yes, please provide details as on a separate attachment.



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If you are now or have ever been a REALTOR®, indicate your NAR Member Number (NRDS Number) and last year of completion of NAR's Code of Ethics training requirement.

NRDS Number: _____

Date of Code of Ethics Training: _____

New Agent Required Orientation and MLS Class: _____

Have you ever 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:

Specialty:

- Residential Commercial Resort
 International Other: _____

How long with current real estate firm? _____

Number of years engaged in the real estate business: _____

Previous real estate firm (if applicable):



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Copy of Real Estate license attached to application

Optional Information

Date of Birth: _____ / _____ / _____

Spouse's Name: _____

By signing below, you have ensured all information is accurate and complete.

Signature

Printed Name

_____ / _____ / _____

Date

Upon signing below, I acknowledge that I am aware of the following Bylaw:

No active member of the Elko County Association of REALTORS® shall be engaged as a broker of record for any individual, firm, partnership or corporation that employs individuals to sell real estate other than those duly licensed under the laws of the State of Nevada." (NRS 645).

With my signature, I also 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 Association, I shall pay the fees and dues as from time to time established.



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_____ Payments to the Elko County Association of REALTORS® are not deductible as charitable contributions. Such payments may, however, be deductible as an ordinary and necessary business expense. No refunds.

_____ 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.

Agent Signature

Agent Printed Name

_____/_____/_____

Date

Broker Signature

Broker Printed Name

_____/_____/_____

Date



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REFERENCES

List four references, preferably local REALTOR®. Members of **YOUR OWN FIRM or MEMBERSHIP COMMITTEE WILL NOT BE ACCEPTED.** If out-of-area references, please provide addresses.

	<u>Name</u>	<u>Business</u>	<u>Phone</u>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____

EDUCATION:

Post-secondary education (Including Real Estate)

<u>School Name</u>	<u>City/State</u>	<u>Degree</u>	<u>Yrs. Attended</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

