



REALTOR®

# APPLICATION FOR REALTOR® MEMBERSHIP

To the Wilson Board of REALTORS®, I hereby apply for REALTOR® Membership in the Wilson Board of REALTORS® and am enclosing my check in the amount of \$\_\_\_\_\_ for a one-time application fee and \$\_\_\_\_\_ for my 2021 dues made payable to Wilson Board of REALTORS®. My application fee and 2021 dues 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 Constitution, Bylaws and Rules and Regulations of the Wilson Board of REALTORS®, 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 timeframe established in the association's bylaws.

\* 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: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Residence Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Preferred Mailing: [  ] Home [  ] Office Preferred Phone: [  ] Home [  ] Office

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

How long with current real estate firm? \_\_\_\_\_ Previous real estate firm (if applicable): \_\_\_\_\_

Number of years engaged in the real estate business: \_\_\_\_\_

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

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

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, provide details as an attachment.)

Last date (year) of completion of NAR's Code of Ethics training requirement: \_\_\_\_\_

**Are you a principal, partner, corporate officer or branch office manager?** [  ] Yes [  ] No

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 Wilson 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: \_\_\_\_\_

**Wilson Board of REALTORS®, 2308-B Cedar Run Place, Wilson, NC 27896 – Office 252-243-2966, Fax 252-243-3332**