



BROKER 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

Mailing 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? If yes, where? _____
 Yes No
 Current Member

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

If Secondary, name of Primary Association: _____

WARDEX & SUPRA

User Name (up to 8 characters): _____

Password: _____
Temporary password will be given
(We will give you a temporary password when you turn in your paperwork. The first time you log in, you will be prompted to update your password)

SUPRA eKey 4 digit pin: _____

FIRM/OFFICE INFORMATION

Firm Address: _____

Office Phone: _____

Date Hired by Firm: _____

Office Fax: _____

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



**APPLICATION FOR ASSOCIATION MEMBERSHIP AS PRINCIPAL,
PARTNER, CORPORATE OFFICER OR BRANCH OFFICE MANAGER**
ALL INFORMATION IS REQUIRED – PLEASE PRINT LEGIBLY

SECTION I

Applicants for Membership as principals, partners, corporate officers, or branch office managers 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:

Mailing 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: Broker Salesperson Other _____

Name of Firm/Office: _____

Firm/Office Address: _____

E-mail Address: _____

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

This section must be completed by applicants for Membership, whether Primary or Secondary, who are principals, partners, corporate officers, or branch office managers (i.e. individuals in positions of management control)

Is the office address specified in Section I your principal place of business?

Yes No

If no, please provide address of principal place of business:

SECTION II (cont.)

List the names and addresses of all branch offices or other real estate firms in which you are a principal, partner, and/or corporate officer:

Name:

Address:

Name:

Address:

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.

SECTION II (cont.)

Are you a current member of a multiple listing service (MLS), which is owned and operated by a Board or Association affiliated with the NATIONAL ASSOCIATION OF REALTORS®?

Yes No

If "yes", please list the name of each MLS.

Have you ever previously held a Real Estate license? Yes No

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):

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):

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):

SECTION II (cont.)

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 _____, and continuously licensed since _____
(Month, Year) (Month, Year)

Resident in area since: _____ Previous Residence: _____
(City, State)

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.):

SECTION III (cont.)

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

If “yes”, please list: _____
(Position and Location)

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:

*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
*Amended by KGVAR—June 2020

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: _____

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

Western Arizona REALTOR® Data Exchange (WARDEX)

Service Participation Agreement (rev.1-20-2016)

I, _____, Designated REALTOR®/Broker of the Real Estate Firm of:

_____ Request subscription in the

WESTERN ARIZONA REALTOR® DATA EXCHANGE (hereinafter referred to as WARDEX or "SERVICE"). BUSINESS NAME CHANGES REQUIRE A NEW SERVICE PARTICIPATION AGREEMENT FOR REVIEW AND WRITTEN APPROVAL. ALL FRANCHISES MUST HAVE A WRITTEN APPROVAL FROM FRANCHISE UPON SUBMISSION OF THIS FORM.

In requesting participation, I agree that the firm and the Designated REALTOR®/Broker will be responsible for all fees assessed to Participants, as well as any user fees which are due and payable for individual services rendered, as set forth in the fee schedule available to Participants. I understand, as a Designated REALTOR®/Broker, I am responsible for all licenses in my office and the licensees' access to the WARDEX database through my participation. The firm also agrees that it is jointly and severally liable for all service fees incurred by the firm and/or said licensees. It is further understood that there will be no refunds of said fees.

As a Participant, I have read, understand 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 Participant, I agree to utilize all data received by the SERVICE in accordance with the SERVICE Rules and Regulations. Designated REALTOR®/Broker is hereby noticed 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 Participant, 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.

As a Participant, I authorize all licensees in my office to have access to the SERVICE through my office or their own personal computer equipment. **It is understood that IDX feeds require separate application and approval (reference WARDEX Internet Data Display Agreement).**

This Participation 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.

Due to the serious nature of the agreement, I agree to review with each licensee in my office the potential consequences of a violation of the WARDEX Rules and Regulations, especially as it is related to the unauthorized dissemination of SERVICE copyright information.

DATE: _____

Designated Broker printed name (type or print clearly): _____

Designated Broker signature: _____

Firm name (type or print clearly): _____

Firm address (type or print clearly): _____