



APPLICATION FOR REALTOR® MEMBERSHIP

To the Addison County Board of REALTORS®, I hereby apply for REALTOR® Membership in the above named Board and am enclosing my check in the amount of \$_____ (prorated annual dues) payable to **Addison County Board of REALTORS**. My application fee and annual 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 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, Constitutions, 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, not be completed within 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.

NOTE: 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®.
* Amount shown is prorated according to effective date of license and/or join date.

I hereby submit the following information for your consideration:

Name as appears on license: _____

Real Estate License (required) #: _____

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

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, provide details as an attachment.)

If you are now or have ever been a REALTOR®, indicate your NAR membership (NRDS) #: _____ and 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, If yes, you must also complete 3rd page of this application.

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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 Addison County 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.

Agreeably to the provision of the Code of Ethics and the provisions of Vermont State law (12 Vermont Statutes Annotated 156552 (b)), I understand that my membership in the Board includes as an integral part of an agreement to arbitrate disputes as set forth in the Code of Ethics. I further understand that upon becoming a member of the Board I will not be able to bring a lawsuit concerning any dispute that may arise which is covered by the agreement to arbitrate and the disciplinary procedures of the Board unless it involves a question of constitutional or civil rights. Instead, I agree to submit all such disputes to the procedures established by the Board and will abide by any award rendered substantially in accordance with the procedures established by the Code of Ethics governing such disputes.

Dated: _____, 201____

Signature: _____
New Member/Applicant

APPLICATION FOR REALTOR® MEMBERSHIP: FOR DESIGNATED BROKERS/BRANCH MANAGERS

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: _____

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Dated: _____

Signature: _____

Broker/DR, if applicant

Realtor 2017	NAR**	NAR Image*	VR Dues	VR Issues***	Addison	App Fee	Total Due
January	120.00	35.00	305.00	10.00	200.00	0.00	670.00
February	110.00	35.00	279.58	10.00	200.00	0.00	634.58
March	100.00	35.00	254.17	10.00	200.00	0.00	599.17
April	90.00	35.00	228.75	10.00	150.00	0.00	513.75
May	80.00	35.00	203.33	10.00	150.00	0.00	478.33
June	70.00	35.00	177.92	10.00	150.00	0.00	442.92
July	60.00	35.00	152.50	10.00	100.00	0.00	357.50
August	50.00	35.00	127.08	10.00	100.00	0.00	322.08
September	40.00	35.00	101.67	10.00	100.00	0.00	286.67
October*	30.00	35.00	76.25	10.00	50.00	0.00	201.25
November*	20.00	35.00	50.83	10.00	50.00	0.00	165.83
December*	10.00	35.00	25.42	10.00	50.00	0.00	130.42
* members joining in October, November, December will also be charged 2018 dues							
** prorated							
***not prorated							
no late fee during renewal							
No App or late fees							
Affiliate 2017	1st person in office	Addl members in office					
January	100.00	10.00 pp					
February	100.00	10.00 pp					
March	100.00	10.00 pp					
April	75.00	10.00 pp					
May	75.00	10.00 pp					
June	75.00	10.00 pp					
July	50.00	10.00 pp					
August	50.00	10.00 pp					
September	50.00	10.00 pp					
October	25.00	10.00 pp					
November	25.00	10.00 pp					
December	25.00	10.00 pp					