

White Mountain Board of REALTORS®

53 Technology Lane, Suite 116, Conway, NH 03818 Tel: 603-733-4748 Fax: 603-447-9947 Email: anne@whitemountainboard.com

Application for REALTOR® Membership

I hereby apply for REALTOR® (Primary, Secondary or Designated) Membership in the White Mountain Board of REALTOR®.

Enclosed please find my:

- > Application for REALTOR® Membership
- Application Summary
- Applicant's Acknowledgement Letter
- > A copy of my Real Estate License
- A check to cover my application fee and the (prorated) dues for this year.

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 White Mountain Board of REALTORS®, 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. My membership is final only upon approval by the Board of Directors and may be revoked should completion of mandatory 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 if I am accepted as a member and subsequently resign from the Board or otherwise cause membership to terminate with an ethics complaint pending, the Board of Directors may condition renewal of membership upon my certification that I will submit to the pending ethics proceeding and will abide by the decision of the hearing panel. If I resign or otherwise cause membership to terminate, the duty to submit to arbitration continues in effect even after my membership lapses or is terminated, provided the dispute arose while I was a REALTOR®.

I hereby submit the following	information for	your consideration	n:		
Name:	Real Estate Lic	cense #:	_		
Licensed/Certified Appraise	r: 🗆 Yes 🗀 i	No Appraisal Lice	ense #:		
Cell Phone #:					
Real Estate Office Name:_			_		
Real Estate Office Address:			_		
Office - Phone:	Fax:	E-Mail	*:		
Residence Address:					
Residence - Phone:	Fax:	E-I	Mail*:		
*I acknowledge that the m	ain form of com	nmunication with	the White Mo	ountain Boa	rd of
REALTOR® is by Email.					
 Are you presently a r If yes, name of Asso 				ÿ®? □Yes	☐ No
 Have you held members If yes, name of Asso 				³? ☐ Yes	□No
 Have you been found Association of REAL pending? Yes 	.TORS® in the pa	ast three (3) years	s or are there	any such co	
 Are you now or have NAR membership (N of Ethics training req 	IRDS) #:	and date		•	•
 Are you a principal, p If yes, you must also Application" starting 	complete the "D	esignated Broker	•		

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.

I acknowledge that payments to the White Mountain Board of REALTORS® are not deductible as charitable contributions. Such payments may, however, be deductible as an ordinary and necessary business expense.

Refunds for any reason other than non-approval of this application are not within the realm of the Bylaws.

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 addresses, telephone numbers, fax numbers, E-mail addresses 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.

Signature:	Date:				
Optional Information:					
Specialties ☐ Residential ☐ Commercial ☐ Resort	☐ International				
☐Other:					
How long with current real estate firm?	Previous real estate firm:				
Number of years engaged in the real estate business:					

<u>Designated Brokers/Branch Managers Membership Application</u> (if applicable)

Company information: Sole Proprietor Partnership Corporation LLC
Your position: Principal Partner Corporate Officer Branch Office Manager
Names of other Partners/Officers/ of your firm:
Have you 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 held, a real estate license in any other state? ☐ Yes ☐ No If yes, where?
Have you or your firm been found in violation of state real estate licensing regulations within the last three years? ☐ Yes ☐ No If yes, provide details:
Have you or your 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? Yes No If yes, provide details:

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Signature:	Date:

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