



Lenawee County Association of Realtors®

Lenawee County Association of REALTORS® Application for REALTOR® Membership


I _____ hereby apply for REALTOR® Membership in the
Lenawee County Association of REALTORS® (“the Association”).

Application Fees and Dues: Enclosed is payment in the amount of \$ _____ for my one time application fee and my prorated membership dues payable directly to the Lenawee County Association of REALTORS®.


Qualifications for Membership. I understand that membership brings certain privileges and obligations that require compliance, including the following:

- I will attend orientation within 90 days of the Association confirming my membership. Failure to meet this requirement may result in having my membership terminated.
- Membership in the Association necessarily means that I am also a member of the State Association and National Association of REALTORS® and I agree to abide by the Code of Ethics of the National Association, which includes the duty to arbitrate (or to mediate if required by the association), as well as the Constitution, Bylaws and Rules and Regulations of the Association, the State Association and the National Association. Further, if required, I agree to satisfactorily complete the periodic Code of Ethics training and a reasonable and non-discriminatory written examination on such Code, Constitutions, Bylaws and Rules and Regulations.
- I acknowledge that as a member of the Association, I will be licensed to use the REALTOR® trademarks to indicate such membership, and I agree to abide by the rules governing use of those trademarks. I understand that REALTOR® is a federally registered trademark of the National Association and use of this designation is subject to rules promulgated by the National Association. Upon termination of my membership in the Association for any reason, my license to use the term REALTOR® is automatically revoked and I will immediately discontinue use of the term REALTOR® and all REALTOR® trademarks.
- Membership is final only upon approval by the Board of Directors and may be revoked should completion of any membership requirement, such as orientation, not be completed with the timeframe established in the Association’s bylaws.

NOTE: *The duty to submit to an ethics complaint continues in effect even after membership lapses or is terminated. Any ensuing discipline will be held in abeyance until such time as the respondent rejoins an association of REALTORS® (see Code of Ethics and Arbitration Manual, Section 20(e)). The duty to submit to arbitration continues in effect even after membership lapses or is terminated, provided the dispute arose while the former member was a REALTOR®.*

 517.263.0325

 mls@lcarlive.com
LCARlive.com

 4125 Occidental Hwy., P.O. Box 425
Adrian, MI 49221

Contact Information:

Name: _____

Address: _____

Phone: _____ Fax: _____

Email: _____

May the Association, as well as the State and the National Associations, communicate with you via text message? Yes No

License Information:

Broker or Salesperson's License #: _____

Appraisal License #: _____

Do you hold, or have you ever held, a real estate license in an other state: Yes No

If yes, where: _____

Company Information:

Name: _____

Address: _____

Phone: _____ Fax: _____

Company Type: Sole Proprietor Partnership Corporation LLC (Limited Liability Company)

Other, specify _____

Your position: Principal Partner Corporate Officer Majority Shareholder Branch Office Manager
 Non-Principal Licensee Other: _____

Names of other Partners/Officers of your firm: _____

Is the office address provided above your principal place of business? Yes No

If not, or if you have a branch office, please provide that address: _____

Preferred Mailing/Contact Information:


Preferred Phone: Home Office Cell _____

Preferred Email: Primary Email Secondary Email _____


Preferred Mailing: Home Office Office Mail Alternate Member Mail Alternate

Office Mailing Alternate:

Address: _____

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Applicant Information:

Do you acknowledge that your use of the REALTOR® trademarks must comply with the National Association’s trademark rules?¹

Yes No

Are you currently a member of an other Association of REALTORS®? Yes No

If yes, name of Association: _____

Type of membership held: _____

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

If yes, name of Association: _____

Type of membership held: _____

Do you have any unsatisfied discipline pending for violation of the Code of Ethics?² Yes No

If yes, provide details: _____

If you are now or have been a REALTOR® member before, please provide the information below.

Previous NAR membership (NRDS) #: _____

Last date (year) of completion of NAR’s Code of Ethics training requirement: _____

I certify that I am a member in good standing of the _____ Association of REALTORS®

¹The term REALTOR® is a federally registered collective membership mark which identifies a real estate professional who is a member of the National Association and subscribes to its strict Code of Ethics. The National Association’s Trademark Rules are set forth in the Membership Marks Manual, available at: www.realtor.org/mmm.

²Article IV, Section 2, of the NAR Bylaws prohibits Member Boards from knowingly granting REALTOR® or REALTOR-ASSOCIATE® membership to any applicant who has an unfulfilled sanction pending which was imposed by another association of REALTORS® for violation of the Code of Ethics. (Adopted 1/01)

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: _____

Do you have any record of civil judgment imposed within the past seven (7) years involving judgments of civil rights laws, real estate license laws, or other laws prohibiting unprofessional conduct rendered by the courts or other lawful authorities? Yes No


If yes, provide details: _____

Do you have a record of criminal conviction(s) within the past seven (7) years? Yes No


Additional Optional applicant Information to be completed and considered only if the Association has adopted Section 2(c) from Article V of the NAR Model Bylaws.

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? Yes No

If yes, provide details: _____

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Are there pending ethics complaints against you? Yes No

If yes, provide details: _____

Do you have any unsatisfied discipline pending? Yes No

If yes, provide details: _____

Are you a party to pending arbitration request? Yes No

If yes, provide details: _____

Do you have any unpaid arbitration awards or unpaid financial obligations to another association of REALTORS® or an Association
MLS? Yes No

If yes, provide details: _____

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 Association. I shall pay the fees and dues as from time to time established. **NOTE:** Payments to the Association 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.

Signature: _____ Date: _____

Optional Information

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

Number of years in the real estate business: _____ Field of Business (Specialties)? _____

Languages Spoken? _____

Information to be supplied by Local Association

Join Date: _____ Status: Active Provisional

Primary Local Association NRDS ID# _____ Primary State Association NRDS ID# _____

Office ID (if broker): _____ Office Contact (Designated REALTOR®) _____

Office Contact Manager: _____ Number of Non-Member Licensees: _____



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