



APPLICATION FOR OFFICE REALTOR® MEMBERSHIP (NON-MLS)

(DUES ARE NON-REFUNDABLE)

As of this date: _____, I hereby apply for REALTOR® Membership in the Three Rivers Association of REALTORS®, and enclose my check in the amount of \$ _____, which I understand will be returned to me to me in the event I am not accepted for membership. In the event my application is approved, I agree as a condition of membership to complete the Orientation course of the Three Rivers Association and to 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 National Association of REALTORS®, and the Bylaws and Rules and Regulations of the Three Rivers Association of REALTORS®, the Illinois Association of REALTORS® and the National Association of REALTORS®. I further agree that my act of paying dues shall evidence my initial and continuing commitment to abide by the aforementioned Code of Ethics, Bylaws, Rules and Regulations, and duty to arbitrate all, as from time to time amended. Finally, I consent and authorize the Association, through its Membership Committee or otherwise, to invite and receive information and comments about me from any member or other person, and I agree that any information and comments 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 if accepted as a member and he/she subsequently resigns or is expelled from membership in the Association with an ethics complaint or arbitration request pending, the Board of Directors may condition renewal of membership upon Applicant's verification that he/she will submit to the pending ethics or arbitration proceeding and will abide by the decision of the hearing panel; or if Applicant resigns or is expelled from membership without having complied with an award in arbitration, the Board of Directors may condition renewal of membership upon his/her payment of the award, plus any costs that have previously been established as due and payable in relation thereto, provided that the award and such costs have not, in the interim, been otherwise satisfied.

AGENT INFORMATION:

Agent Name (as shown on license): _____
First Initial Last

Real Estate License # _____ Appraisal License # _____

Appraiser: _____ Broker: _____ Management Broker: _____ Male: _____ Female: _____

Residence Address: _____
Street City State Zip

Home Phone: _____ Fax: _____ Cell: _____

Preferred Number (you would like on your listings): Home: _____ Cell: _____ Office: _____ Other: _____

Email Address: _____ Birth Date: _____ Social Security Number: _____

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OFFICE INFORMATION:

Office Name: _____

Office Address: _____
Street City State Zip

Office Phone: _____ Office Fax: _____

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ASSOCIATION OFFICE USE ONLY:

Date Rec'd _____ MLS Info given _____ MLS ID# _____

Are you now employed or engaged in any other business or profession? Yes No
From To
Company City Position Dates

In what other business have you been engaged (Previous employment)? Yes No
From To
Company City Position Dates

Highest Level of education completed? _____

First became licensed: _____

Have you been continuously in the business since then? Yes No

Have you ever attended a REALTOR® Association Orientation course? Yes No

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

If yes, specify: _____

Do you now, or have you previously held membership in this or any other real estate association, whether or not affiliated with the National Association of REALTORS®? _____

If yes, type of membership and dates established _____

Have you ever been convicted of a felony? _____

If yes, give details* _____

Has your real estate license in this or any other state been suspended or revoked? _____

If yes, give details* _____

Have you ever been refused membership in any real estate association? _____

If yes, state basis for such refusal* _____

Is there now, or have there been within the past five years, any complaints against you before any state real estate regulatory agency or any other agency of government? _____

If yes, give details* _____

I agree to the following terms and conditions: (1) If accepted for membership in the Three Rivers Association of REALTORS®, I shall pay the fees and dues as from time to time established; (2) To attend the orientation as dictated by the Bylaws of this Association; and (3) If my financial obligations are not paid in a timely manner in accordance with the Bylaws and Rules and Regulations of the Association, I may be required to reapply as a new member with the required new member fees and education.

I hereby certify that the information furnished by me is true and correct. I also 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.

SIGNED: _____ DATE: _____

*Attach separate sheet as required

COMPLETE THIS PAGE ONLY IF YOU ARE APPLYING FOR NEW OFFICE MEMBERSHIP

Office Name: _____

Office Address: _____

Check Whether: Corporation Partnership Individual d/b/a

State Position with Firm: Principal Partner Corporate Officer Employee
 Independent Contractor Other

If "Other," please explain: _____

Is the Office Address stated above your principal place of business? Yes No

If not, or if you have any branch offices, please indicate and give addresses: _____

Are you actively engaged in the real estate business? Yes No

Established in present location on _____

Last previous location(s) on: _____

Name of Designated REALTOR® ("D.R."): _____

Are you applying for primary or secondary membership? _____

Do you want MLS access? Yes No

Do you want lock box privileges? Yes No

Location of Escrow Account: _____

Escrow Account Number: _____

Credit Reference: _____

Personal Reference: _____
(Name of Association member preferable)

I hereby certify that the foregoing information 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. As a condition of membership on behalf of my office, I agree that my office shall arbitrate all business disputes in accordance with the Code of Ethics and Arbitration Manual of the National Association of REALTORS® and further agree that my office shall comply with the Bylaws and Rules and Regulations of the Three Rivers Association of REALTORS®. I further understand and agree that either myself or any other person appointed by my office as the D.R. shall be individually responsible for all financial obligations of my office to the Three Rivers Association of REALTORS®.

SIGNED: _____ DATE: _____

NEW OFFICE MEMBERSHIP

**Please list the name, license number and primary board/association affiliation for all licensees in your office.
(There must be a Designated REALTOR® in that board/association to qualify for primary membership.)**

Licensee Name	License Number	Primary Board/Association
_____	_____	_____
_____	_____	_____
_____	_____	_____
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Each licensee will be required to complete an appropriate membership application.