



APPLICATION FOR REALTOR® MEMBERSHIP

*NOTE: Dues payments to the Bay Area Association of REALTORS®, Inc. are not tax deductible as charitable contributions. Portions of such payments may be tax deductible as ordinary and necessary business expenses. **Dues payments are non-refundable.***

REALTOR® -- Primary Membership I hereby apply for REALTOR® membership in the Bay Area Association of REALTORS®, Inc. and am enclosing my check in the amount of \$_____ (contact BAAR for amount) which I understand will be returned to me in the event I am not accepted to membership.

***Please note that your office manager or broker must be either a primary or secondary member of BAAR for you to qualify for a primary membership in BAAR.** ***

REALTOR® -- Secondary Membership I hereby apply for REALTOR® membership in the Bay Area Association of REALTORS®, Inc. and am enclosing my check in the amount of \$_____ (contact BAAR for amount) which I understand will be returned to me in the event I am not accepted to membership.

Please read and initial the following guidelines:

____ I agree to abide by the Code of Ethics of the National Association of REALTORS®, which includes the duty to arbitrate commission disputes. (A copy of the code will be provided at New Member Orientation).

____ I agree to abide by the Bylaws of the Bay Area Association of REALTORS®, Inc. (A copy of the code will be provided at New Member Orientation).

____ I agree to attend the New Member Orientation Class within three (3) months of application or I will be fined \$100 for non-enrollment. Furthermore, I accept that, if I do not attend a new member orientation class within six (6) months, the Bay Area Association of REALTORS®, Inc. may revoke my membership until orientation has been completed. ***(Not required for secondary membership or members transferring in from another Association/Board.)***

____ I understand that membership brings certain privileges and obligations that require compliance.

____ I understand that Membership may be revoked should completion of requirements, such as orientation, not be completed within the established timeframe. 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.

____ A copy of my real estate license is attached.

____ The act of paying my dues shall evidence my initial and continuing commitment to abide by the aforementioned Code of Ethics, Constitutions, Bylaws, Rules & 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 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, if accepted as 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.

****A MARYLAND JUDICIAL CASE SEARCH WILL BE CONDUCTED ON ALL NEW APPLICANTS AS PART OF THE APPROVAL PROCESS**

PERSONAL INFORMATION: ALL fields are MANDATORY and must be completed

Name: Miss / Ms. / Mrs. / Mr. _____
(as appears on real estate license; including generation)

Nickname: _____ Date of Birth: _____

Home Address: _____ Home Phone: _____

City: _____ State: _____ Zip: _____ Cell Phone: _____

Do you want your home number published in the BAAR roster? Y / N Social Sec. # ____ - ____ - ____

What is your preferred phone number? ___ Office ___ Home ___ Cell

What is your preferred mailing address? ___ Office ___ Home

Business Email: _____

Real Estate License No: _____ * Exp. Date: _____

Licensed/certified appraiser: Yes No Appraisal License # _____

License Type: ___ Broker ___ Salesperson ___ Assoc. Broker

Are you presently a member of any other Association of REALTORS®? Yes No

If yes, name of Association and type of membership held: _____

If yes, attach a 'Letter of Good Standing' to application from current association.

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) number: _____
and last date (year) of completion of NAR's Code of Ethics training requirement _____

Have you been convicted, adjudged or otherwise recorded as guilty by final judgment of any court of competent jurisdiction of a felony or other crime? Yes No If yes, provide details (attach additional sheets if necessary)

FIRM INFORMATION:

Firm Name: _____

Firm Address: _____

City: _____ State: _____ Zip: _____ Email: _____

Is firm's affiliation with BAAR ___ primary or ___ secondary?

*****Please note that your office manager or broker must be either a primary or secondary member of BAAR for you to qualify for a primary membership in BAAR.***

Position with Firm: ___ Broker ___ Associate Broker ___ Office Manager
___ Independent Contractor ___ Certified Appraiser ___ Licensed Appraiser

MISCELLANEOUS:

Previous Occupation: _____

Special designations currently held: __ GRI __ CRS __ CRB __ Other _____

Would you be interested in serving on one of our committees at the Bay Area Association of REALTORS®, Inc.?

- Yes No

If yes, please choose committee:

- | | |
|---|---|
| <input type="checkbox"/> Awards | <input type="checkbox"/> Nominating (current BOD members) |
| <input type="checkbox"/> Community Service | <input type="checkbox"/> Public Relations |
| <input type="checkbox"/> Education | <input type="checkbox"/> RPAC |
| <input type="checkbox"/> Finance/Budget (Board Officers only) | <input type="checkbox"/> Grievance |
| <input type="checkbox"/> Legislative | <input type="checkbox"/> Professional Standards |
| <input type="checkbox"/> Membership | |

COMMUNICATIONS CONSENT AGREEMENT As a member of the Bay Area Association of REALTORS®, Inc. (BAAR), I understand that, by providing my e-mail address, telephone number and fax number, I consent to receive communications sent via e-mail, telephone or fax, by or on behalf of the Bay Area Association of REALTORS®, Inc., the Maryland Association of REALTORS® and the National Association of REALTORS®, including subsidiaries and affiliates of the respective organizations. I understand that the Bay Area Association of REALTORS®, Inc. will not share my email/telephone/fax information with any unaffiliated companies or organizations.

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 a misstatement of fact, may be grounds for revocation of my membership, if granted. I agree that, if accepted for Membership in the Association, I shall pay the fees and dues as from time to time established.

Date: _____

Signature: _____
(Applicant)

TO BE COMPLETED BY BROKER OR MANAGER FOR NEW APPLICANT:

I hereby certify that the above named applicant is associated with my firm and I recommend that the applicant be admitted to Active Membership in the Bay Area Association of REALTORS®, Inc.

Broker/Manager Name: (please print) _____

Company _____

Broker/Manager Signature _____ Date _____

A copy of applicants real estate license must accompany application