

## **APPLICATION FOR REALTOR® MEMBERSHIP**

I hereby apply for REALTOR® Membership in the West Central Association of REALTORS® (WCAR) ("the Association")

**Application Fees and Dues:** Enclosed is payment in the amount of \$50 for my one time application fee to WCAR and \$100 for my one time application fee to the Minnesota Association of REALTORS® and my prorated membership dues for a total of \$\_\_\_\_\_\_ payable directly to the West Central Association of REALTORS®. (proration chart available at www.wcarmn.com)

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

- I will attend REALTOR orientation within **1 year** 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 West Central Association, the State Association and the National Association. Further, I agree to satisfactorily complete the periodic Code of Ethics training.
- 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 within the timeframe established in the Association's bylaws.

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 West Central Association of REALTORS® are not deductible as charitable contributions. Such payments may, however, be deductible as an ordinary and necessary business expense. No refunds.

Applicants Signature	Date				
Applicants Printed Name					

**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 $^{\circ}$  (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 $^{\circ}$ .

CONTACT INFO	RMATION:									
First Name		]	Middle Name							
Last Name			Suffix [	] Jr, [	] III, [	] Sr, [	Etc	z		
Nickname (DBA	x):									
Home Address:										
City:		State	:				2	Zip:		
Home Phone:			Cell l	Phone:						
Fax:										
Primary E-mail:				Second	lary E-1	mail:				
May the Association, as well as the State and the National Associations, communicate with you via text message?										
LICENSE INFOR	MATION:									
Applicants License #										
License Type:		Broker Salesperson								
State of Licensure: Apprais			praisal License #							
Do you hold, or have you ever held, a real estate license in any other state?   Yes No										
If so, where:										
COMPANY INFOR	OMATION:									
Office Name:	WATION.									
Office Address:										
Office Phone: Fax:										
Your position: Principal Partner Corporate Officer Majority Shareholder										
Branch Office Manager Non-principal Licensee Other										
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:										
Address:							1			
City:			State:				7	Zip:		
	irrent real estate fir									
Number of years estate business:	engaged in the real									
Field of Business	(Specialties)?									
Languages Spoken?										

PREFERRED MAILING/CONTACT INFORMA	TION:				
Preferred Phone: Home Office C	ell				
Preferred E-mail: Primary E-mail	Secondary E-mail				
Preferred Mailing: Home Office	Office Mail Alternate	ber Mail Alternate			
Mail Publications to: Home Office	Office Mail Alternate Me	ember Mail Alternate			
Office Mailing Alternate: (to be completed	d only if checked above)				
Address:					
City:	State:	Zip:			
Member Mailing Alternate: (to be comple	ted only if checked above)				
Address:					
City:	State:	Zip:			
APPLICANT INFORMATION:					
Do you acknowledge that your use of the RE	1 •	with the National			
Association's trademark rules? <sup>i</sup> Yes	No				
Are you currently a member of any other Ass	sociation of REALTORS®? Yes	es No			
If yes, name of					
Association					
Have you previously held membership in any	y other Association of REALTORS	S®? LYes No			
If yes, name of Association					
Association					
Do you have any unsatisfied discipline pendi	ng for violation of the Code of Eth	ics ?ii Yes No			
If yes, provide					
details.					
If you are now or have been a REALTOR® i	member before, please provide the	information below.			
Previous NAR					
membership (NRDS) #					
Have you ever been refused membership in a	any other Association of REALTOI	RS®?			
If yes, state the basis for each such refusal and detail the circumstances related thereto:					
Do you have any record of civil judgments in	nposed within the past seven (7) ve	ears 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:					

Will you be subscribing to	Sentrilock Electronic Lockbox	tes? Yes No	Need more information
Will you be subscribing to	Forewarn Agent Security App	? Yes No	Need more information
Check if you would like i	information on our Member (	Committees	
Member Enhancement	MLS/Northstar	Education	
Committee:	Advisory:	Committee:	
recognizes that certain sta	t may be provided by me to the te and federal laws may place li as as part of my membership.		
Dated:	Signature: _		
member of the National Associ	lerally registered collective membersh lation and subscribes to its strict Code Marks Manual, available at: www.re	of Ethics. The National As	

## MLS and SENTRILOCK ELECTIONIC LOCKBOX INFORMATION

If you also require MLS access the MLS Agent Data Worksheet must be completed. All WCAR members have the option of subscribing to our electronic lockbox service the service includes App access and electronic lockboxes for one quarterly fee, boxes do not have to be purchased separately, subscriber agreement must be completed. MLS and Sentrilock access have an additional quarterly fee that must be paid in advance of account activation.

<sup>&</sup>lt;sup>ii</sup> Article 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)