



REALTOR-ASSOCIATE® MEMBERSHIP APPLICATION

For BNAR use only:

Member # _____

NRDS # _____

Public ID _____

Mr. [] Mrs. [] Ms. [] Miss [] *Fields in Yellow are required

Name: _____ Broker Code: _____

Company Name: _____

Company Address: _____ Zip Code: _____

Company Phone: _____ Company Fax: _____

Home Address: _____ City: _____ Zip Code: _____

Gender [] Male [] Female Date of Birth: ___/___/___ Home Phone: () ___-___-___

Cell Phone: () ___-___-___ Accepts Texts [] Yes [] No Direct Line: () ___-___-___

E-Mail Address: _____

Real Estate License Number: _____ Expiration Date: ___/___/___

Foreign Language (s) that I speak _____

I hereby apply for REALTOR-ASSOCIATE® membership in the above named Association, enclosing my checks or credit card form for my dues and mls fee. These fees will be returned only in the event of non-approval. If approved, I agree to abide by the Code of Ethics of the NATIONAL ASSOCIATION OF REALTORS® and the Constitution, By-laws, Rules and Regulations of the above named Association, the New York State Association, and the National Association, and if required, I further agree to satisfactorily complete reasonable and non-discriminatory written examination on such Code, Constitution, By-laws, Rules, and Regulations. I consent that the Association through its MEMBERSHIP COMMITTEE or otherwise, may invite and receive information and comment about me from any member or other person, and I further agree that any information and comment furnished to the Association by any person in response to the 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.

I FURTHER UNDERSTAND, CONSENT AND AGREE, THAT AS A CONDITION OF MEMBERSHIP, I WILL ATTEND THE THREE (3) HOUR ASSOCIATION ORIENTATION COURSE WITHIN 60 DAYS OF THIS APPLICATION.

I have taken the following Real Estate Courses:

School: _____ Course _____ Date Completed _____

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Real Estate Brokers with whom I have been associated:

Broker: _____ From _____ To _____

Broker: _____ From _____ To _____

I HEREBY SUBMIT THE ABOVE TO YOU FOR CONSIDERATION:

Applicant's Signature _____ Date _____

DESIGNATED REALTORS® STATEMENT:
I hereby request that the application of the individual who signed for membership in the Buffalo Niagara Association of REALTORS® be favorably acted upon. I hereby assume the responsibility of notifying the Buffalo Niagara Association of REALTORS® if the individual is terminated or in the event the activities of this individual do not conform to the By-laws of the organization. A COPY OF YOUR ASSOCIATE'S LICENSE (NOT POCKET CARD) AND MLS SERVICE FEE (IF APPLICABLE) MUST ACCOMPANY THIS APPLICATION.

DESIGNATED REALTORS® / OFFICE MANAGER SIGNATURE _____ DATE _____

* THERE ARE NO REFUNDS OF DUES OR FEES*