



Lincoln County Board of REALTORS®
2403 NW Hwy 101, Suite I
Lincoln City, OR 97367

REALTOR®
Membership Application
Fee \$50.00

I am applying for membership in the Lincoln County Board of REALTORS® as:

- DESIGNATED REALTOR® - A Principal Broker or Owner responsible for the office.
REALTOR® - A Broker or Principal Broker NOT responsible for the office
SECONDARY REALTOR® - a Broker or Principal Broker currently holding primary membership in a REALTOR® Association/Board other than LCBR. My primary Association/Board is:

- TRANSFERRING REALTOR® - A Broker or Principal Broker transferring membership from another REALTOR® Association/Board. My previous Association/Board was:

My NAR/NRDS I.D. number is: My last Code of Ethics training was taken on:

First Name: Middle Initial: Last Name:

Licensed "NickName":

Real Estate License Number:

Office Name:

Office Address:

City: State: Zip:

Office Phone: Office Fax:

Physical Home Address:

Mailing Address:

City: State: Zip:

Email Address: Website:

Cell Phone: Emergency Phone:

Preferred Phone: Cell Home Office Other

Preferred Mailing: Home (Physical) Office Mailing Address

Have you previously held membership in any REALTOR® Association/Board No Yes

If yes, which one(s):

If accepted as a member, I agree to the following conditions of membership in the Lincoln County Board of REALTORS® (please read carefully and initial)

I agree to abide by the Code of Ethics of the NATIONAL ASSOCIATION OF REALTORS®, which includes the duty to arbitrate (or to mediate if required by the association) and the Constitution, Bylaws and Rules and Regulations of the Lincoln County Board of Realtors®, the Oregon Association of Realtors® and the National Association of Realtors®.



_____ I agree to attend the LCBR New Member Orientation class. I understand that I must attend one of the next two classes available after my join date.

_____ I understand that I must complete the NAR New Member Code of Ethics training within 60 days of my join date and will complete periodic Code of Ethics training as specified in the Board's bylaws as a continued condition of membership.

_____ I understand that e-mail communication is the primary form of communication from LCBR, and I will read and respond accordingly to emails received from LCBR.

_____ I will promptly advise LCBR of any changes to my contact information; i.e., e-mail addresses, mailing address, phone number, etc.

_____ I understand that my dues will be returned to me in the event that I am not accepted to membership.

Note: Applicant acknowledges that if accepted as a member and he/she subsequently resigns from the Board or otherwise causes membership to terminate with an ethics complaint pending, the Board of Directors may condition renewal of membership upon applicant's certification that he/she will submit to the pending ethics proceeding and will abide by the decision of the hearing panel. The duty to submit to arbitration continues in effect even after membership lapses or is terminated, provided the dispute arose while applicant was a Realtor®

By my signature below, I certify the accuracy of this application

Signature: _____ Date: _____

Please submit applicable prorated amount below, which includes dues for LCBR, NAR ,OAR and. Dues are non-refundable.

Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
\$545.00	\$508.75	\$472.50	\$436.25	\$400.00	\$463.75	\$327.50	\$291.25	\$255.00	\$219.75	\$182.50	\$146.25

Payment Options:

Credit Card: \$ _____

Card Number: _____ Security Code: _____ Exp Date: _____

Billing Address: _____

Name on Card (please print): _____

Signature: _____

Check: \$ _____

Cash: \$ _____

If paying by check or credit card you may submit this application by US mail, email or fax. If paying by cash, please present your application in person.

Lincoln County Board of REALTORS®
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