



APPLICATION FOR REALTOR® MEMBERSHIP

I hereby apply for REALTOR® Membership in the Middle Tennessee Association of REALTORS® (“the Association”)

Application Fees and Dues: Enclosed is payment in the amount of \$_____ for my one time application fee and \$_____ for my prorated membership dues payable directly to the Middle Tennessee Association of REALTORS®.

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

- I will attend orientation within **three offerings (six months total)** of the Association confirming my membership. Failure to meet this requirement may result in having my membership terminated, and requiring payment of an additional re-application fee.
- Membership in the Association necessarily means that I am also a member of the State Association, TN REALTORS®, 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 Association, the State Association and the National Association. Further, I agree to satisfactorily complete the periodic Code of Ethics training and a reasonable and non-discriminatory written examination on such Code, Constitutions, Bylaws and Rules and Regulations.
- 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 acknowledge that information provided in this application may be shared with other REALTOR® associations, both locally and nationally, as required by local or national Bylaws. I authorized MTAR to contact me when necessary using any means provided under the License & Personal Information section of this application, as well as the use of phone, fax, email, text or any systems utilized by my current firm, or with any firm within this association that I may be affiliated with in the future.
- I understand that the membership dues that I have submitted with this application are pro-rated based on the date of my affiliation with the REALTOR® firm noted on this application, and any other factors that are used to determine the amount of my dues. I understand that the membership dues are annual and renewable, prorated for the balance of the current year, and that membership dues are refundable only if I am refused membership into the association.

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® (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®.

CONTACT INFORMATION:					
First Name			Middle Name		
Last Name			Suffix <input type="checkbox"/> Jr, <input type="checkbox"/> III, <input type="checkbox"/> Sr, <input type="checkbox"/> Etc.	M/F:	
Name as shown on your TREC license					
Home Address:					
City:			State:		Zip: <input type="text"/>
Home Phone:				Cell Phone: <input type="text"/>	
Primary E-mail: <input type="text"/>			RealTracs Public/ID: <input type="text"/>		

With submission of this application, MTAR, TN REALTORS®, and NAR, have permission to communicate with you via text message, email & phone.		<input type="checkbox"/> Yes <input type="checkbox"/> No
DATE OF BIRTH:	Voting City & County in which you reside:	
Broker or Salesperson's License #		
Auctioneer License #:	Appraisal License #	
Do you hold, or have you ever held, a real estate license in any other state? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If so, where:		
Any other licensed profession? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, what:	

COMPANY INFORMATION:			
Office Name:			
Office Address:			
Office Phone:		Broker of Record:	
How long with current real estate firm?			
Previous real estate firm (if applicable):			
Number of years engaged in the real estate business/Original license date:			
Field of Business (Specialties/Current Designations)?			
Languages Spoken?			

PREFERRED MAILING/CONTACT INFORMATION:			
Preferred Phone:	<input type="checkbox"/> Office <input type="checkbox"/> Cell		
Preferred E-mail:	<input type="checkbox"/> Primary E-mail <input type="checkbox"/> Other E-mail		
Preferred Mailing:	<input type="checkbox"/> Home <input type="checkbox"/> Office	Personal Business Website:	
Preferred Name for our Publications:			

APPLICANT INFORMATION:			
Are you currently a member of any other Association of REALTORS®? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, name of Association			
Type of membership held:			
Have you previously held membership in any other Association of REALTORS®? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, name of Association			
Type of membership held:	Dates of Membership there:		
Have you been found in violation of state real estate licensing regulations, civil rights laws or other laws prohibiting unprofessional conduct rendered by the courts or other lawful authorities within the last three (3) years? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, provide details:			

If you are a first-time real estate licensee, with no prior association experience, please continue to Page 4, for certification and signature.

PRIOR REALTOR® EXPERIENCE:

If you are now or have been a REALTOR® member before, please provide the information below.

Previous NAR membership (NRDS) #

Last date (year) of completion of NAR's Code of Ethics training requirement:

Do you have any unsatisfied discipline pending for violation of the Code of Ethics ?¹ Yes No

If yes, provide details:

Have you been found in violation of TN real estate licensing regulations, civil rights laws, or other laws prohibiting unprofessional conduct rendered by the courts or other lawful authorities within the last three years?

Yes No

If yes, provide details:

Do you acknowledge that your use of the REALTOR® trademarks must comply with the National Association of REALTORS® trademark rules?

Yes No

Are there pending ethics complaints against you? Yes No

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? Yes No

At which Association:

Are you a party to pending arbitration request? Yes No

If yes, provide details.

Do you have any unpaid arbitration awards or unpaid financial obligations to another association of REALTORS® or an Association MLS? Yes No

If yes, provide details.

¹ 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)

Application Acknowledgement:

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

By signing below, I consent that the REALTOR® Associations (local, state, national) and their subsidiaries, if any (e.g., MLS, Foundation) may contact me at the specified address, telephone numbers, fax numbers, email address or other means of communication available. This consent applies to changes in contact information that may be provided by me to the Association(s) in the future. This consent recognizes that certain state and federal laws may place limits on communications that I am waiving to receive all communications as part of my membership.

Dated: _____

Signature: _____

INFORMATION TO BE SUPPLIED BY LOCAL ASSOCIATION

Join Date:			
Status:	<input type="checkbox"/> Active <input type="checkbox"/> Provisional		
Primary Local Association NRDS ID #			
Primary State Association NRDS ID #			
Office ID:			
(If broker)			
Office Contact (Designated REALTOR®)			
Office Contact Manager:			
Number of Non-Member Licensees:			
Processed by MTAR Staff Member:			
Payment Information	Visa	MasterCard	DiscoverCard American Express
Credit Card Number:			
Expiration Date:	V-Code:		