



REALTOR® MLS Only Application

Date: _____

Name as shown on Real Estate license: _____

Date of Birth _____ License # _____

License Type: Broker Sales Person

Membership Applying for: Primary Secondary MLS Only

Firm Name: _____

Firm Address: _____

Firm Phone: _____

Home Address: _____

Home Phone: _____ Cell Phone: _____

E-Mail: _____

Which mailing address do you prefer as your primary? Home Office

Would you like to be added to KWAR e-mail list to receive dues notices, event info, etc? Yes No

Are you a member or have you been a member of any other real estate Association? Yes No

If yes, state name(s) of other Association(s) and type(s) of membership held and NRDS #: _____

Have you ever been refused membership in any other Real Estate Association? Yes No

If Yes, state basis for such refusal and circumstances related thereto: _____

SKILLS/EXPERTISE

- | | |
|--|---|
| <input type="checkbox"/> Accounting | <input type="checkbox"/> Government Relations |
| <input type="checkbox"/> Education/Training | <input type="checkbox"/> Public Relations |
| <input type="checkbox"/> Fundraising | <input type="checkbox"/> Planning |
| <input type="checkbox"/> Human Resources | <input type="checkbox"/> Financial |
| <input type="checkbox"/> Marketing | <input type="checkbox"/> Strategic Planning |
| <input type="checkbox"/> Management | <input type="checkbox"/> Technology |
| <input type="checkbox"/> Program Development | <input type="checkbox"/> Legal |

<u>OFFICE USE ONLY</u>	
NRDS #	_____
ORIENTATION	_____
<input type="checkbox"/> NAVICA	<input type="checkbox"/> Paid _____
<input type="checkbox"/> NRDS	<input type="checkbox"/> Welcome Letter
<input type="checkbox"/> QB	<input type="checkbox"/> Letter of Good Stnd
<input type="checkbox"/> MAIL CHIMP	
<input type="checkbox"/> NEW MEMBER LIST	
<input type="checkbox"/> ORIENTATION	

TERMS & CONDITIONS

- If my application is approved, I agree as a condition of membership to complete the **KWAR Orientation/Ethics course within 90 days of application date**, and otherwise on my own initiative to thoroughly familiarize myself with the Code of Ethics of the National Association of REALTORS®, including the duty to arbitrate business disputes in accordance with the Code of Ethics and Arbitration Manual of the Association and the Constitution, Bylaws and Rules and Regulations of the Blue Ridge Association of REALTORS® and the National Association of REALTORS®.
- I further agree that my act of paying dues shall evidence my initial and continuing commitment to abide by the aforementioned Code of Ethics, Constitutions, Bylaws, Rules and Regulations, and duty to arbitrate, all as from time to time amended.
- Finally, I consent that and authorize the Association, through its Membership Committee or otherwise to invite and receive information and comment about me from any Member or other person, and I agree that any 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, liable or defamation of character.

NOTE: Applicant acknowledges that if accepted as a 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 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 the renewal on his/her payment of the award, plus any costs that have previously been established as fee and payable in relation thereto, provided that the award and such costs have not, in the interim, been otherwise satisfied.

I hereby certify that the 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 agree that, if accepted for Membership in the Association, I shall pay dues and fees from time to time as established.

I understand that Dues and Fees are non-refundable.

_____ Yes _____ No (initial) I agree, as a member of the Key West Association of REALTORS, Inc. to allow any digital images (photographs or videos) of me to be use by KWAR in public relations matters, including newspapers and social media (i.e., FaceBook).

_____ Yes _____ No (initial) I agree, as a member of the Key West Association of REALTORS, Inc. to release of professional information for the purpose of Association related Press Releases and/or for submission of my name in consideration of any real estate related award.

Signature of Applicant: _____ Date: _____

Signature of Designated Broker: _____ Date: _____

Dues Paid:

KWAR	_____	Voluntary RPAC	_____
FAR	_____	Scholarship	_____
NAR	_____		
MLS	_____		
TOTAL	_____		