



APPLICATION FOR REALTOR® MEMBERSHIP

I hereby apply for REALTOR® Membership at South Bend Area REALTORS® ("the Association")

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

- I will attend orientation within **180** days 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 Association, the State Association and the National Association. Further, if required, 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.

CONTACT INFORMATION:									
First Name:					Middle Initial:				
Last Name:						Suffix Jr, III, Sr, Etc.			
Nickname ([(DBA):								
Last 4 Digits	Last 4 Digits of SSN: XXX-XX-								
Home Addre	Home Address:								
City:		State: Zip:							
Home Phone:			Cell	Phone:					
Fax:	-ax:								
Primary E-m	mail: Secondary E-mail:								
May the Association, as well as the State and the National Associations, communicate with you via text message? Yes No									



LICENSE INFORMATION:							
Broker's License #:							
State of Licensure:	Appraisal License #						
Do you hold, or have you ever h	eld, a real estate license in any other state? Yes No						
If so, where:							
COMPANY INFORMATION:							
Office Name:							
Office Address:							
Office Phone:	Fax:						
Preferred Mailing/Contact Info	MATION:						
Preferred Phone: Home	Office Cell						
Preferred E-mail: Primary E-mail Secondary E-mail							
Preferred Mailing: Home	Office						
Mail Publications to: Home	Office						
APPLICANT INFORMATION:							
Are you currently or have you pr Yes No	eviously held membership with any other Association of REALTORS®?						
If yes, name of							
Association							
Do you have any unsatisfied discipline pending for violation of the Code of Ethics ?¹ \ Yes \ No							
If yes, provide							
details.							
Have you ever been refused mer	nbership in any other Association of REALTORS®?						
If yes, state the basis for each su	h refusal and detail the circumstances related thereto:						

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)



Do you have any record of civil judgments imposed within the past seven (7) years 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
the courts or other lawful authorities? Yes No If yes, provide details:
Do you have a record of criminal conviction(s) within the past seven (7) years? Yes No
If yes, provide details:
Additional Optional Applicant Information to be completed and considered only if the Association has adopted Section 2(c) from Article V of the NAR Model Bylaws.
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?
If yes, provide details.
Are there pending ethics complaints against you? Yes No
If yes, provide details.
Do you have any unsatisfied discipline pending ? Yes No
If yes, provide details.
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.



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.

Signature:	Date:	



DUES & FEES FOR REALTOR® MEMBERSHIP

Membership Dues (Mandatory) + Application fees (\$600):

Total Cost	(see table	below): \$	5
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Method of Payment: □ Check □ Visa □ Mastercard □ Discover Make Check Payable to: South Bend Area REALTORS®							
Amount Enclosed/Charge to the Card:							
Account #	Exp Date	/_	CCV				
Billing Address:							
Billing City/State/Zip:							
Signature of Cardholder:							

2021 ASSOCIATION DUES PRORATION

Month	Local	State	National	Local App Fee	State App Fee	TOTAL
January	\$340.00	\$254.00	\$185.00	\$400.00	\$200.00	\$1,379.00
February	\$311.63	\$232.83	\$172.50	\$400.00	\$200.00	\$1,316.96
March	\$283.30	\$211.67	\$160.00	\$400.00	\$200.00	\$1,254.97
April	\$254.97	\$190.50	\$147.50	\$400.00	\$200.00	\$1,192.97
May	\$226.64	\$169.33	\$135.00	\$400.00	\$200.00	\$1,130.97
June	\$198.31	\$148.17	\$122.50	\$400.00	\$200.00	\$1,068.98
July	\$169.98	\$127.00	\$110.00	\$400.00	\$200.00	\$1,006.98
August	\$141.65	\$105.83	\$97.50	\$400.00	\$200.00	\$944.98
September	\$113.32	\$84.67	\$85.00	\$400.00	\$200.00	\$882.99
October	\$84.99	\$63.50	\$72.50	\$400.00	\$200.00	\$820.99
November	\$56.66	\$42.33	\$60.00	\$400.00	\$200.00	\$758.99
December	\$28.33	\$21.17	\$47.50	\$400.00	\$200.00	\$697.00