

MAR NEW MEMBER APPLICATION

Suffix-Jr., Sr., Other	
Sex	
Home Address or PO Box	
Primary Phone	
Is this a Cell Phone?	
May the Association communicate with you via text message?	
Office Phone	
Broker or Appraiser License #	
Office Name	
Broker Name	
Office Address	
Please indicate where you'd like Association publications sent.	
Email	
NRDS Number (if you've previously been a NAR member)	
License Information: State of Licensure (please list all)	<input type="checkbox"/> Colorado <input type="checkbox"/> Other: _____
Are you currently, or have you ever been, a member of another Realtor® Association? If so, where?	<input type="checkbox"/> Yes: _____ <input type="checkbox"/> No
Do you hold, or have you ever held, a real estate license in any other state? If so, where?	<input type="checkbox"/> Yes: _____ <input type="checkbox"/> No

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Have you ever been refused membership in any other Association of REALTORS®?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you acknowledge that your use of the REALTOR® trademarks must comply with the National Association's trademark rules?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have any Code of Ethics violation complaints or discipline pending?	<input type="checkbox"/> Yes <input type="checkbox"/> 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?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have any criminal convictions, or 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?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If you answered "yes" to any of the above, please provide details below.	
Last date (year) of completion of NAR's Code of Ethics training requirement, if applicable:	_____
<p>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.</p>	
Signature _____	Date _____