



296 Bay Road, Queensbury NY 518-798-3425 FAX: 518-798-0554

**APPLICATION FOR REAL ESTATE ASSOCIATION MEMBERSHIP**

- All applicants are required to complete Section I and Section IV. Section III is optional.
- Applicants for REALTOR® membership who are principals, partners, corporate officers or branch office managers must also complete Section II.

**SECTION I**

Applicants Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

(Please fill in both home and business addresses. NOTE: Email above will be used as the primary email address for all correspondence purposes. If you change your email address at any time you must inform the SAR office. We are not responsible for missed correspondence)

Home Address: \_\_\_\_\_ Town/City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Business Address: \_\_\_\_\_ Town/City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Name as it appears on Real Estate license: \_\_\_\_\_ (Please print)

Real Estate License Number: \_\_\_\_\_  
[Attach photocopy of New York State Brokers, Associate Broker or Salesperson License]

License Type:  Broker  Associate Broker  Salesperson  Appraiser  Other--Please specify \_\_\_\_\_

Name of Firm: \_\_\_\_\_

Please select one:  Sole Proprietor  DBA  Partnership  Corporation

Applicant's position with the firm:  Principal  Partner  Corporate Officer  Branch Office Manager  
 Employee  Independent Contractor  Other; \_\_\_\_\_

I hereby apply for REALTOR® (Primary, Secondary or Designated) membership in the above named Association, and enclose my check in the amount of \$\_\_\_\_\_, which I understand will be returned to me in the event I am not accepted to membership. In the event my application is approved, I agree as a condition to membership to complete the New Member Orientation program as prescribed by the Association, if any, and otherwise on my own initiative to thoroughly familiarize myself with the Code of Ethics of the NATIONAL ASSOCIATION OF REALTORS®, INC., including the duty to arbitrate business disputes in accordance with the Code of Ethics and Arbitration Manual of the board and the constitution, bylaws and rules and regulations of the above named Association, the state association and the National Association, and I further agree to complete satisfactorily a reasonable and nondiscriminatory written examination covering such Code, constitution, bylaws, rules and regulations and duty to arbitrate. I further agree that my act of paying dues shall evidence my initial and continuing commitment to abide by the aforementioned Code of Ethics, constitution, bylaws, rules and regulations, and duty to arbitrate, all as from time to time amended. Finally, I consent and authorize the Association, through its Membership Committee or otherwise, to invite and receive information and comments 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, libel or defamation of character.

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*NOTE: Applicant acknowledges that the Association will maintain a membership file of information which may be shared with other Associations where applicant subsequently seeks membership. This file shall include: previous applications for membership; all final findings of Code of Ethics violations and violations of other membership duties within the past three (3) years; pending complaints alleging violations of the Code of Ethics or alleging violations of other membership duties; incomplete or pending disciplinary measures; pending arbitration requests; and information related to unpaid arbitration awards or unpaid financial obligations to the Association or its MLS.*

*NOTE: Applicant acknowledges that if accepted as a member and he/she subsequently resigns from the Association 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. If applicant resigns or otherwise causes membership to terminate, 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®.*

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**Are you a member of an institute, society or council affiliated with the NATIONAL ASSOCIATION OF REALTORS? [ ]Yes [ ]no**

If yes, please indicated name of affiliated institute, society or council: \_\_\_\_\_

**Please list any professional designations you hold:** \_\_\_\_\_

*NOTE: An applicant for Institute Affiliate Membership shall supply to the Membership Committee evidence that applicant holds a professional designation awarded by a qualified Institute, society or council affiliated with the NATIONAL ASSOCIATION OF REALTORS® that addresses a specialty area other than residential brokerage or who otherwise holds a class of membership in such Institute, society or council that confers the right to vote or hold office and shall agree, if elected to membership, to abide by the constitution, bylaws and rules and regulations of the local board, the state association and the NATIONAL ASSOCIATION OF REALTORS® INC.*

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**Do you hold, or have you ever had, a real estate license in any other state? [ ]Yes [ ]No**

If YES, please specify the name of state and license number: \_\_\_\_\_

**Has your real estate license, in this or any other state, ever been suspended or revoked? [ ]Yes [ ]No**

If YES, specify the place(s) and date(s) of such action, and detail the circumstances relating thereto: (attach a separate sheet if necessary)

\_\_\_\_\_

\_\_\_\_\_

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**Are there now any pending or unresolved complaints, or have there been within the past 3 years, any complaints against you or the firm with which you have been associated before any state real estate regulatory agency or any other agency of government? [ ]Yes [ ]No**

If YES, please specify the substance of each complaint in each state, the agency before which the complaint was made, and the current status or resolution of such complaint: (attach separate sheet if necessary)

\_\_\_\_\_

\_\_\_\_\_

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**Have you ever been convicted of a felony? [ ]Yes [ ]No**

If YES, please give details including state and court of conviction: (attach separate sheet if necessary)

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**Are you currently a member of another Real Estate Board or Association which is affiliated with the NATIONAL ASSOCIATION OF REALTORS®, INC OR have you ever held membership in another board or association? [ ]Yes [ ]No**

If YES, please list each board and association where membership was held, type of membership held, and approximate dates of membership: \_\_\_\_\_

**If you have a NRDS # please include here:** \_\_\_\_\_

Have you ever been a User or Subscriber in a Multiple Listing Service which is owned and operated by a board or association affiliated with the NATIONAL ASSOCIATION OF REALTORS®, INC.?  Yes  No

if YES, please list the name of each MLS and the approximate dates of participation: \_\_\_\_\_  
\_\_\_\_\_

**SECTION II** *-TO BE COMPLETED BY BROKER APPLICANTS ONLY (or may be filled out by Branch Office Managers)*

**Please indicate the category of membership for which you are applying:**

Institute Affiliate  Affiliate  Public Service  Honorary

**Please use the following checked address (as indicated at the beginning of this application) for all mailing and communication purposes.**

Home Address/Phone and Email

Business Address/Phone and Email

**State the names and titles of all other principals, partners, or corporate officers of your firm:**

Name \_\_\_\_\_ Title \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_

**List names & addresses of all branch offices or other real estate firms in which you are a principal, partner or corporate officer:**

Name \_\_\_\_\_ Address \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_

**Are you, or is any real estate firm in which you are a sole proprietor, general partner or corporate officer involved in any pending bankruptcy or insolvency proceeding or have you or any real estate firm in which you are a sole proprietor, general partner or corporate officer been adjudged bankrupt in the past three (3) years?  Yes  No**

If YES, specify the place(s) and date(s) of such action, and detail the circumstances relating thereto: (attach separate sheet if needed)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

NOTE: Applicant acknowledges that if the applicant or any real estate firm in which the applicant is sole proprietor, general partner, or corporate officer is involved in any pending bankruptcy or insolvency proceedings or has been adjudged bankrupt in the past three (3) years, the Association may require, as a condition of membership, that the applicant pay cash in advance for Association and MLS fees for up to one (1) year from the date that membership is approved or from the date that the applicant is discharged from bankruptcy (whichever is later) or, in the event that bankruptcy proceedings are initiated subsequent to obtaining membership in the Association, that the member may be placed on a "cash basis" from the date that bankruptcy is initiated until one (1) year from the date that the member has been discharged from bankruptcy.

**SECTION III** (Completion of this section is NOT required, however it will assist the Association in establishing historical data regarding its members. Information furnished under Section V will not be used in evaluating an applicant's qualifications for membership)

**Birth Month ONLY:** \_\_\_\_\_

First entered the real estate business on \_\_\_\_\_ [date] at \_\_\_\_\_ [city] \_\_\_\_\_ [state] \_\_\_\_\_

Have you engaged continuously in the business since that time? [ ]Yes [ ]No If NO, during what years were you in the business? \_\_\_\_\_

Please indicate how many years you have been active in the profession: \_\_\_\_\_ years as a Salesperson \_\_\_\_\_ years as a Broker \_\_\_\_\_ Other

Please check any of the following committees which you would like more information about to possibly become active with as part of the Association:

- [ ] Bylaws [ ] Community Relations/Outreach [ ] Education/Member Services [ ] Grievance
- [ ] Public Relations [ ] Legislative Affairs [ ] Scholarship [ ] MLS Operations

Are you a member of, or have you ever held membership in a real estate board NOT affiliated with the NATIONAL ASSOCIATION OF REALTORS, ?

[ ]Yes [ ]No

If YES, please provide name of association, type of membership held and dates:

**SECTION IV--MEMBERSHIP AGREEMENT** (All applicants must complete for membership)

I (Print Name) \_\_\_\_\_ agree as a condition of membership in the Southern Adirondack REALTORS, Inc. to abide by all relevant bylaws, MLS rules and regulations and other obligations of membership, including payment of dues . I further agree to be bound by the Code of Ethics on the same terms and conditions as board/association members, as established in the Code of Ethics and Arbitration Manual, including the obligation to submit to ethics hearings and the duty to arbitrate contractual disputes with other REALTORS in accordance with the established procedures of the board/association. I understand that a violation of the Code of Ethics may result in suspension or termination of association membership and MLS rights and privileges and that I may be assessed an administrative processing fee not to exceed \$500 which may be in addition to any discipline, including fines, that may be imposed

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. 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. I also agree and understand that from time to time the association may take photos at association events and special functions and that by signing this agreement I am allowing any photos that include my image to be used for publication on behalf of the association in print and electronically without any financial enumeration to me.

I agree that, if accepted for membership in the Southern Adirondack REALTORS, Inc., I will pay the fees and dues as from time to time established and there are no refunds. I further agree to attend any mandatory orientation programs for new members as outlined in the bylaws.

DATE \_\_\_\_\_ SIGNATURE \_\_\_\_\_

(Applicant's usual form of signature)

**For office use only:**

Payment Rec'd: DATE: \_\_\_\_\_ ( )Ck ( ) CC Board Action Date: \_\_\_\_\_