

## **APPLICATION FOR REALTOR® MEMBERSHIP**

I hereby apply for REALTOR® Membership in the Egyptian Board of REALTORS®, Inc.

**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 Association of REALTORS<sup>®</sup>.

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

- I will attend orientation within <u>90 days</u> 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<sup>®</sup> trademarks to indicate such membership, and I agree to abide by the rules governing use of those trademarks. I understand that REALTOR<sup>®</sup> 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<sup>®</sup> is automatically revoked and I will immediately discontinue use of the term REALTOR<sup>®</sup> and all REALTOR<sup>®</sup> 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.

**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<sup>®</sup> (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<sup>®</sup>.

| CONTACT INFORMATION:  |       |             |                     |                                  |  |        |         |  |  |
|---|-------|-------------|---------------------|----------------------------------|--|--------|---------|--|--|
| First Name:   |       | Middle Name |                     |                                  |  |        |         |  |  |
| Last Name:  | Name: |             |                     | Suffix 🗌 Jr, 🗌 III, 🗌 Sr, 🗌 Etc. |  |        |         |  |  |
| Nickname (D   | BA):  |             |                     |                                  |  |        |         |  |  |
| Home Addre  | ess:  |             |                     |                                  |  |        |         |  |  |
| City:   |       | State:      |                     |                                  |  |        | Zip:    |  |  |
| Cell Phone:   |       |             |                     | Home Phone:                      |  |        |         |  |  |
| Birthdate:  |       |             |                     |                                  |  |        |         |  |  |
| Primary E-mail:   |       |             | S                   |                                  |  | ry E-  | E-mail: |  |  |
| May the Association, as well as the State<br>Associations, communicate with you via |       |             |                     |                                  |  | Yes No |         |  |  |
| LICENSE INFORMATION: Broker or Salesperson License #:                               |       |             |                     |                                  |  |        |         |  |  |
| State of Licensure:   |       |             | Appraisal License # |                                  |  |        |         |  |  |
| Primary Field of Business:  |       |             |                     |                                  |  |        |         |  |  |

## Do you hold, or have you ever held, a real estate license in any other state? 🗌 Yes 🗌 No

If so, where:

| COMPANY INFORMATION:   |   |                      |                 |  |  |  |  |  |
|--|---|----------------------|-----------------|--|--|--|--|--|
| Office Name:   |   |                      |                 |  |  |  |  |  |
| Office Street Address:   |   |                      |                 |  |  |  |  |  |
| Address:   |   |                      |                 |  |  |  |  |  |
| City:  | State:  | Zip:                 |                 |  |  |  |  |  |
| Office Mailing Address:  |   |                      |                 |  |  |  |  |  |
| Address:   |   |                      |                 |  |  |  |  |  |
| City:  | State:  | Zip:                 |                 |  |  |  |  |  |
| Office Phone:  | Fax   |                      |                 |  |  |  |  |  |
| Company Type: 🗌 Sole Proprieto   | or 🗌 Partnership 🗌 C                              | orporation 🗌 LLC (Li | mited Liability |  |  |  |  |  |
| Company) 🗌 Other, specify  |   |                      |                 |  |  |  |  |  |
| Your position: Principal Partner Corporate Officer Majority Shareholder                                    |   |                      |                 |  |  |  |  |  |
| Branch Office Manager No   | on-principal Licensee 🗌                           | Other                |                 |  |  |  |  |  |
| Names of other Partners/Officers   | •   |                      |                 |  |  |  |  |  |
| Is the office address provided a   |   |                      | es 🔄 No         |  |  |  |  |  |
| If not, or if you have a branch offic  | ce, please provide that ad                        | dress:               |                 |  |  |  |  |  |
| Address:   |   |                      | 1               |  |  |  |  |  |
| City:  | State:  | Zip:                 |                 |  |  |  |  |  |
| PREFERRED MAILING/CONTACT INFO   | RMATION:  |                      |                 |  |  |  |  |  |
| Preferred Phone: Home C  | Office 🗌 Cell                                     |                      |                 |  |  |  |  |  |
| Preferred E-mail: Primary E-mail Secondary E-mail:   |   |                      |                 |  |  |  |  |  |
| Preferred Mailing: Home Office   |   |                      |                 |  |  |  |  |  |
| Mail Publications to: Home Office  |   |                      |                 |  |  |  |  |  |
| Member Mailing Address:  |   |                      |                 |  |  |  |  |  |
| Address:   |   |                      |                 |  |  |  |  |  |
| City:  | State:  | Zip:                 |                 |  |  |  |  |  |
|  |   |                      |                 |  |  |  |  |  |
| APPLICANT INFORMATION:<br>Do you acknowledge that your use of the REALTOR® trademarks must comply with the |   |                      |                 |  |  |  |  |  |
| <b>National Association's trademark rules?</b> <sup>1</sup> Yes No   |   |                      |                 |  |  |  |  |  |
| Are you currently a member of any other Association of REALTORS®? Yes No                                   |   |                      |                 |  |  |  |  |  |
| If yes, name of Association  |   |                      |                 |  |  |  |  |  |
| Type of membership held:   | Type of membership held:NAR membership # (NRDS #) |                      |                 |  |  |  |  |  |
| Last date (year) of completion of NAR's Code of Ethics training requirement:                               |   |                      |                 |  |  |  |  |  |

<sup>&</sup>lt;sup>1</sup> The term REALTOR<sup>®</sup> is a federally registered collective membership mark which identifies a real estate professional who is a member of the National Association and subscribes to its strict Code of Ethics. The National Association's Trademark Rules are set forth in the Membership Marks Manual, available at: www.realtor.org/mmm.

| Have you previously held membership in any other Association of REALTORS®?                       |   |                          |  |  |  |  |  |
|--|---|--------------------------|--|--|--|--|--|
| Yes No   |   |                          |  |  |  |  |  |
| If yes, name of Association  |   | Type of membership held: |  |  |  |  |  |
| Do you have any unsatisfied discipline pending for violation of the Code of Ethics? <sup>2</sup> |   |                          |  |  |  |  |  |
| Yes No   |   |                          |  |  |  |  |  |
| If yes, provide details.   |   |                          |  |  |  |  |  |
| <b>Have you ever been refused membership in any other Association of REALTORS®?</b> Use No       |   |                          |  |  |  |  |  |
| If yes, state the basis for each such refusal and detail the circumstances related thereto:      |   |                          |  |  |  |  |  |
| Have you been found in violation   | 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? Yes No  |   |                          |  |  |  |  |  |
| If yes, provide details:   |   |                          |  |  |  |  |  |
| Within the last ten years, have you been: 1) convicted of a crime punishable by death or         |   |                          |  |  |  |  |  |
| imprisonment in excess of one year or 2) been released from confinement imposed for that         |   |                          |  |  |  |  |  |
| conviction? Yes No   |   |                          |  |  |  |  |  |
| If yes, provide details:   |   |                          |  |  |  |  |  |
| Have you been found in violation   |   |                          |  |  |  |  |  |
| duties in any Association of REA   | If yes, provide details.  |                          |  |  |  |  |  |
| Yes No   Are there pending ethics complaints against you? Yes No   If yes, provide details.      |   |                          |  |  |  |  |  |
| Are there pending ethics complai   | If yes, provide details.  |                          |  |  |  |  |  |
| Do you have any unsatisfied disci  | If yes, provide details.  |                          |  |  |  |  |  |
| Are you a party to pending arbiti  | If yes, provide details.  |                          |  |  |  |  |  |
| Do you have any unpaid arbitrati<br>to another association of REALT                              | 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<sup>®</sup> 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: \_\_\_\_\_

<sup>&</sup>lt;sup>2</sup> 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)