



# APPLICATION FOR HDBR REALTOR® MEMBERSHIP & MLS SERVICE

### YOUR PREFERRED EMAIL ADDRESS: \_\_\_\_\_

To the Harrison District Board of Realtors®, I hereby apply for REALTOR® Membership in the above named Board and I am enclosing a letter of good standing from my Primary Board (If applicable). In order for an agent to join the MLS, the Broker must also join and sign any necessary waivers.

In the event of my election, I agree to abide by the Code of Ethics of the National Association of REALTORS®, and the Constitution, Bylaws and Rules and Regulations of the above named Board, the State Association and the National Association, and if required, I further agree to satisfactorily complete a reasonable and non-discriminatory written examination on such Code, Constitutions, Bylaws and Rules and Regulations. I consent that the Board, through its Membership Committee or otherwise, may invite and receive information and comment about me from any member or other person, and I further agree that any information and/or comment furnished to the Board by any person in response to the 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. I understand membership brings certain privileges and obligations that require compliance. Membership is provisional and may be revoked should completion of requirements, such as the orientation, not be completed within times indicated in the Bylaws. My application fee and dues will be returned to me I the event of non-election.

*NOTE: Applicant acknowledges that if accepted as a member and he/she subsequently resigns from the Board/Council or otherwise causes membership to terminate with an ethics complaint pending, the Board of Directors may conditional 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 applicante was a REALTOR®.*

Name: \_\_\_\_\_ Real Estate License #: \_\_\_\_\_  
Office Name: \_\_\_\_\_  
County of Office: \_\_\_\_\_  
Office Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_ Fax: \_\_\_\_\_  
Residence Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_ Fax: \_\_\_\_\_  
Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Highest level of education completed: \_\_\_\_\_ First entered real estate business in: \_\_\_\_\_  
Have you been engaged continuously in the business since then? \_\_\_\_ If not, what years in R.E.? \_\_\_\_\_  
In what other business have you been engaged? \_\_\_\_\_  
Are you now employed or engaged in any other business? \_\_\_\_ If yes, where? \_\_\_\_\_  
Are you now a member of any other real estate Board/Council of REALTORS®? \_\_\_\_ If yes, name the Board/Council and type of membership held \_\_\_\_\_ Have you previously held membership in any other Board/Council? \_\_\_\_ If yes, name the Board/Council and type of membership held: \_\_\_\_\_

If you are now or have ever been a REALTOR®, indicate your NAR membership (NRDS) # \_\_\_\_\_  
Have you ever been convicted of a felony? \_\_\_\_ Have you filed for bankruptcy in the last three years? \_\_\_\_  
Was an Arkansas Real Estate Commission hearing held prior to being granted a Real Estate license? \_\_\_\_  
I hereby give permission to the National Association of REALTORS®, the Arkansas REALTORS® Association and the Harrison District Board of REALTORS® to fax Association information to me including soliciting bullets:  
(Initial) \_\_\_\_\_

**Are you a designated broker or branch manager? \_\_\_\_ If yes, you must complete the 2<sup>nd</sup> page of this application.**

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 Board, I shall pay the fees and dues as from time to time established.

**NOTE:** Payments to the Harrison District Board of REALTORS® are not deductible as charitable contributions. Such payments may, however, be deductible as an ordinary and necessary business expense. All dues are to be paid online at realtor.org. Payments are set on an annual basis. No refunds.

- HDBR Annual Membership Dues- \$60
- HDBR Annual MLS Dues \$920
- HDBR One Time Member Set Up Fee \$200
- HDBR One Time Brokerage Set Up Fee \$200 (For Brokers only)

Dated: \_\_\_\_\_

Signature: \_\_\_\_\_

**APPLICATION FOR REALTOR® PRIMARY MEMBERSHIP: PAGE 2 FOR DESIGNATED  
BROKERS/BRANCH MANAGERS**

Does your office comply with zoning requirements for this location? \_\_\_\_\_  
Company information: \_\_\_\_\_ Individual \_\_\_\_\_ DBA \_\_\_\_\_ Partnership \_\_\_\_\_ Corporation  
Your position: \_\_\_\_\_ Principal \_\_\_\_\_ Partner \_\_\_\_\_ Corporate Officer \_\_\_\_\_ Trustee \_\_\_\_\_ Employee \_\_\_\_\_ Independent  
Contractor \_\_\_\_\_ Other: \_\_\_\_\_

Names of Principles/Partners/Officers/Trustees of your firm:  
\_\_\_\_\_  
\_\_\_\_\_

Have you ever been refused membership in any other real estate Board/Council? \_\_\_\_\_  
If yes, state the basis for each such refusal and detail the circumstances related thereto:  
\_\_\_\_\_  
\_\_\_\_\_

Is the Office Address, as stated, your principal place of business? \_\_\_\_\_  
If not, or if you have any branch offices, please indicate and give address:  
\_\_\_\_\_

In what areas of real estate do you specialize? \_\_\_\_\_

Principals, please list institution in which you maintain your escrow account: \_\_\_\_\_

Do you hold, or have you ever held, a real estate license in any other state? \_\_\_\_\_  
If so, where: \_\_\_\_\_

Have there been any complaints, within the last five years, against you or the firm with which you are associated?  
\_\_\_\_\_

If so, please specify:  
\_\_\_\_\_  
\_\_\_\_\_

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 Board, I shall pay the fees and dues as from time to time established. **NOTE:** Payments to the Harrison District Board of REALTORS® are not deductible as charitable contributions. Such payments may, however, be deductible as ordinary and necessary business expense. No refunds.

Dated: \_\_\_\_\_ Signature: \_\_\_\_\_