



ROCKY MOUNTAIN ASSOCIATION OF REALTORS®

MEMBERSHIP APPLICATION

Please check the membership or memberships you are applying for

NAME OF APPLICANT : \_\_\_\_\_

**MEMBERSHIP INTO THE RMAR BOARD OF REALTORS®**

\_\_\_\_\_ Membership into the ROCKY MOUNTAIN ASSOCIATION OF REALTORS as a Board Member  
\_\_\_\_\_ AS MY PRIMARY BOARD OR \_\_\_\_\_ MY SECONDARY BOARD

**MEMBERSHIP INTO THE REGIONAL MULTIPLE LISTING SERVICE:**

\_\_\_\_\_ Membership into the Regional MLS AS A: \_\_\_\_\_ PARTICIPANT OR \_\_\_\_\_ SUBSCRIBER

- ***THE MLS Participant is the person who is the Principal person in your office who has the Participatory rights to your office joining the Regional Multiple Listing Service.***
- ***Subscribers (or users) of the MLS include non-principal brokers, sales associates, and licensed and certified appraisers affiliated with participants. (Optional provision: Subscribers also include affiliated unlicensed administrative and clerical staff, personal assistants, and individuals seeking licensure or certification as real estate appraisers who are under the direct supervision of an MLS participant or the participant's licensed designee***

I AM A: \_\_\_\_\_ BROKER OWNER \_\_\_\_\_ BROKER \_\_\_\_\_ SALES ASSOCIATE \_\_\_\_\_ APPRAISER

LICENSE NUMBER: \_\_\_\_\_

DATE YOU BECAME A LICENSED SALES ASSOCIATE, BROKER OR APPRAISER: \_\_\_\_\_

FOR New licensee-Date you made application for a real estate license: \_\_\_\_\_

DATE YOU BECAME AFFILIATED WITH YOUR CURRENT OFFICE: \_\_\_\_\_

NAME OF OFFICE: \_\_\_\_\_

OFFICE: ADDRESS: \_\_\_\_\_

NAME OF THE DESIGNATED REALTOR® (DR): \_\_\_\_\_

DR'S LICENSE# \_\_\_\_\_

**Question For MLS Membership:**

IS YOUR DESIGNATED REALTOR® ALSO YOUR MLS PARTICIPANT? YES \_\_\_ NO \_\_\_

IF DIFFERENT NAME YOUR MLS PARTICIPANT: \_\_\_\_\_

MLS PARTICIPANT LICENSE NUMBER: \_\_\_\_\_

NAME OF THE BROKER /OWNER: \_\_\_\_\_

LICENSE#: \_\_\_\_\_ EMAIL: \_\_\_\_\_

**SALES ASSOCIATE:**

IF YOU ARE A SALES ASSOCIATE LIST THE DATE YOU BECAME SUPERVISED BY YOUR CURRENT SUPERVISING BROKER: \_\_\_\_\_

NAME OF YOUR SUPERVISING BROKER: \_\_\_\_\_

LICENSE #: \_\_\_\_\_ EMAIL: \_\_\_\_\_

**If you are a licensed Sales Associate or Broker in another state or belong to another Board or MLS please read below:**

ARE YOU LICENSED ALSO IN ANOTHER STATE OR COUNTRY: \_\_\_ YES \_\_\_ NO

IF YES PLEASE LIST WHAT STATE AND YOUR REAL ESTATE LICENSE NUMBER OR NUMBERS:

STATE \_\_\_\_\_ LICENSE# \_\_\_\_\_

STATE \_\_\_\_\_ LICENSE# \_\_\_\_\_

I AM: CURRENTLY A MEMBER OF THE NATIONAL ASSOCIATION OF REALTORS® \_\_\_ YES \_\_\_ NO

**I CURRENTLY BELONG TO THE FOLLOWING STATE REALTOR® ASSOCIATIONS:**

NAME: \_\_\_\_\_ ADDRESS \_\_\_\_\_

NAME: \_\_\_\_\_ ADDRESS \_\_\_\_\_

**CURRENTLY BELONG TO THE FOLLOWING LOCAL ASSOCIATIONS:**

NAME: \_\_\_\_\_ ADDRESS \_\_\_\_\_

Board type: \_\_\_ PRIMARY \_\_\_ SECONDARY

NAME: \_\_\_\_\_ ADDRESS \_\_\_\_\_

Board Type: \_\_\_ PRIMARY \_\_\_ SECONDARY

**PLEASE NAME ANY PAST REALTOR® ASSOCIATIONS THAT YOU HAVE BELONGED TO:**

NAME: \_\_\_\_\_ ADDRESS \_\_\_\_\_

NAME: \_\_\_\_\_ ADDRESS \_\_\_\_\_

ARE YOU CURRENTLY A MEMBER OF ANOTHER MULTIPLE LISTING SERVICE:  YES  NO

IF YES, PLEASE NAME THE MLS ORGANIZATIONS YOU BELONG TO AND THE NAME OF YOUR

Participant \_\_\_\_\_

\_\_\_\_\_ As a Subscriber \_\_\_\_\_ As a Participant

Have You Been Refused In Any Other REALTOR® Association or MLS Service:  Yes  No

If "Yes," please state basis for each refusal and detail the circumstances related thereto:

\_\_\_\_\_

Are there now, or have there ever been within the last five 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 the government?  Yes  No

Is the applicant or any real estate firm in which the applicant is a sole proprietor, general partner, corporate officer, or branch office manager, involved in any pending bankruptcy or insolvency proceedings or, has been adjudged bankrupt in the past three (3) years?  yes  no

If "Yes," specify the details of each complaint in each state, the agency before which the complaint was made, and the current status or resolution of such complaint: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Have you ever been convicted of a felony?  Yes  No

If yes, please

explain: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

If You Are Broker/Owner, Designated REALTOR® or The MLS Participant of your office, please list all Licensed Brokers, Sales Associates or Appraisers in your office.

- |     |       |     |       |
|-----|-------|-----|-------|
| 1.  | _____ | 11. | _____ |
| 2.  | _____ | 12. | _____ |
| 3.  | _____ | 13. | _____ |
| 4.  | _____ | 14. | _____ |
| 5.  | _____ | 15. | _____ |
| 6.  | _____ | 16. | _____ |
| 7.  | _____ | 17. | _____ |
| 8.  | _____ | 18. | _____ |
| 9.  | _____ | 19. | _____ |
| 10. | _____ | 20. | _____ |

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 AND BY SIGNING THIS APPLICATION I AGREE TO HAVE THE MLS DO A BACKGROUND CHECK.

Signed: _____	_____	_____
(Applicant)	(Designated REALTOR®)	date
	_____	_____
	MLS Participant	date
	_____	_____
	Supervising Broker	date

**APPLICATION AGREEMENT FOR MEMBERSHIP INTO THE ROCKY MOUNTAIN ASSOCIATION OF REALTORS®**

I hereby apply for membership with the ROCKY MOUNTAIN ASSOCIATION OF REALTORS®. I agree to submit my personal/business check in the amount outlined on Form 1-A at the time of application, which will be returned to me in the event of non-election. I understand my application and fees must be complete before my application will be processed.

Applicant agrees as a condition to membership to thoroughly familiarize himself/herself with the Code of Ethics of the NATIONAL ASSOCIATION OF REALTORS®, the Constitutions, Bylaws, and Rules and Regulations of the association, the State and National Associations, and if elected a member, will abide by the Constitutions and Bylaws and Rules and Regulations of the association, State and National Associations, and if a REALTOR® member, will abide by the Code of Ethics of the NATIONAL ASSOCIATION OF REALTORS® including the obligation to arbitrate controversies arising out of real estate transactions as specified by Article 17 of the Code of Ethics, and as further specified in the Code of Ethics and Arbitration Manual of the NATIONAL ASSOCIATION OF REALTORS® as from time to time amended, and (2) that applicant consents that the association, through its membership committee or otherwise, may invite and receive information and comment about applicant from any member or other persons, and that applicant agrees that any information and comment furnished to the association by any person in response to the invitation shall be conclusively deemed to be privileged and not form the basis of any action for slander, libel, or defamation of character. The applicant shall, with the form of application, have access to a copy of the Bylaws, Constitution, Rules and Regulations, and Code of Ethics referred to above.

Designated REALTOR® Members. Each firm (or office in the case of firms with multiple office locations) shall designate in writing one REALTOR® member who shall be responsible for all duties and obligations of membership, including the obligation to arbitrate pursuant to Article 17 of the Code of Ethics and the payment of association dues as established in Article X of the Bylaws. The “Designated REALTOR®” must be a sole proprietor, partner, corporate officer, or branch office manager acting on behalf of the firm’s principal(s) and must meet all other qualifications for REALTOR® membership established in Article V, Section 2, of the Bylaws. The Designated REALTOR® of applicant is aware of his/her obligations and responsibilities as above applicants Designated REALTOR®.

By signing below- I the REALTOR® APPLICANT and Designated REALTOR® have read the above Application Agreement and agree to the terms. I have been provided a copy of the Butte Board of REALTORS® By Laws.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
date

\_\_\_\_\_  
Signature of Designated REALTOR® date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Printed Name

