



Sheboygan County Board of REALTORS®
639 Walton Drive
Plymouth, WI 53073
920-892-7908

APPLICATION FOR MEMBERSHIP

Membership Type: Realtor Secondary Realtor Affiliate Secondary Affiliate

Applicants Name: _____

Company Name: _____

Business Address: _____

Business Phone: _____ Business Fax: _____

Business Email: _____

Home Address: _____

Home Phone: _____ Cell Phone: _____

Home Email: _____

I hereby apply for REALTOR® membership in the above-named Board and an enclosing my check in the amount of \$_____ Dues are payable to the Sheboygan County Board of REALTORS®. My dues will be returned to me in the event I am not accepted to membership. In the event my application is approved, I agree to abide by the Code of Ethics of the NATIONAL ASSOCIATION OF REALTORS®, which includes the duty to arbitrate, and the Constitution, Bylaws and Rules and Regulations of the above-named Board, the State Association and the National Association and I further agree to satisfactorily complete a reasonable and nondiscriminatory written examination on such Code, Constitutions, Bylaws, Rules and Regulations. I further agree that my act of paying dues will evidence my initial and continuing commitment to abide by the aforementioned Code of Ethics, Constitutions, Bylaws, Rules and Regulations, and duty to arbitrate, all as from time to time amended. I understand membership brings certain privileges and obligations that require compliance. Membership is final only upon approval by the Board of Directors and may be revoked should completion of requirements, such as orientation, not be completed within a time frame established in the association's bylaws. I understand that I will be required to complete periodic Code of Ethics training as specified in the association's bylaws as a continued condition of membership. Finally, I consent and authorize the Board, through its Membership Committee or otherwise, to invite and receive information and comment about me from any Member or other person, and I agree that any information and comment furnished to the Board by any member or other person in response to any such invitation will be conclusively deemed to be privileged and not form the basis of any action by me for slander, libel, or defamation of character.

The applicant acknowledges that the Board will maintain a membership file of information which may be shared with other Boards/Associations where the 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 Board or its Multiple Listing Service.

The applicant acknowledges that if accepted as a Member and he or she subsequently resigns from the Board or otherwise causes membership to terminate with an ethics complaint pending, the Board of Directors may condition renewal of membership upon applicant's verification that he or she will submit to the pending ethics or arbitration proceeding and will abide by the decision of the Hearing Panel. If the 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 the applicant was a REALTOR®.

I hereby submit the following information for your consideration:

Name as shown on Real Estate/Appraiser/Inspector License: _____

Real Estate License Number: _____ Type of license: Broker _____ Salesperson _____

Appraisal License number: _____

Inspector License number: _____

Position with firm: _____ Designated REALTOR® _____ Partner
 _____ Branch Office Manager _____ Employee
 _____ Independent contractor _____ Licensed Personal Assistant

SECTION II (REQUIRED): Board has the right to verify present or past membership with the State Association

Is the office address stated in Section I your principal place of business? Yes _____ No _____

Are you currently a member of any other Association of REALTORS® Yes _____ No _____

Have you held membership in another Board or Association within the past three (3) years? Yes _____ No _____

If yes, list each Board and Association where membership was held, type of membership held and approximate dates of membership. (attach separate sheet if necessary)

Board: _____ Dates: _____

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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 or are there any such complaints pending: Yes _____ No _____
(If yes, provide details as an attachment.)Have you ever been refused membership in any other Association of REALTORS®? Yes _____ No _____
If yes, state the basis for each such refusal and detail the circumstances related thereto:

Do you hold, or have you ever held, a real estate/appraiser license in any other state? Yes _____ No _____
If yes, please specify name of state and license number _____Has your real estate/appraiser license, in this or any other state, 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 separate sheet if necessary)

If you are now or have ever been a REALTOR®, indicate your NAR membership (NRDS) number: _____
and last date (year) of completion of NAR's Code of Ethics training requirement: _____Have you participated in a Multiple Listing Service which is owned and operated by a Board or Association affiliated with the NATIONAL ASSOCIATIONS OF REALTORS® within the past three (3) years? Yes _____ No _____
If yes, list the name of each MLS and the approximate dates of participation:

MLS: _____ Dates: _____

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Have you ever been convicted of a felony? Yes _____ No _____
If so, give details including state and court of conviction: (attach separate sheet if necessary)

SECTION III - PERSONAL DATA (REQUIRED):

INFORMATION SUPPLIED UNDER SECTION III WILL ASSIST THE BOARD IN ESTABLISHING HISTORICAL DATA REGARDING ITS MEMBERS. INFORMATION FURNISHED UNDER SECTION III WILL NOT BE USED IN EVALUATING AN APPLICANT'S QUALIFICATIONS FOR MEMBERSHIP.

Date of Birth: _____

Spouse's name: _____

Specialty: Residential ____ Commercial ____ Resort ____ International ____ Other (specify) _____

Date first entered the real estate/appraiser/inspector business _____

Date first licensed in Wisconsin? _____

Are you now employed by or engaged in any other business or profession? Yes ____ No ____

If yes, give position and location: _____

VOLUNTARY INFORMATION

Information supplied is not required, but will assist the Association in establishing historical data regarding its members. Information furnished on this form will not be used in evaluating an applicant's qualifications for membership.

The sole purpose of gathering this information is to advance the goals of the Voluntary Affirmative Marketing Agreement (VAMA) signed by the NATIONAL ASSOCIATION OF REALTORS® and the Sheboygan County Board of REALTORS®

Voluntary information concerning the race/ethnic/national origin of applicant:

_____ African-American/Black (not of Hispanic origin)

_____ American Indian or Alaskan Native

_____ Asian or Pacific Islander

_____ Hispanic

_____ White (not of Hispanic origin)

_____ Multi-Racial

SECTION IV - DESIGNATED BROKERS/BRANCH MANAGERS (REQUIRED):

Company information: Sole Proprietor Partnership Corporation LLC (Limited Liability Company)

Your position: Principal Partner Corporate Officer Branch Office Manager

Is the Office Address, as stated, your principal place of business? Yes ____ No ____

If not, or if you have any branch offices, please indicate and give address: (attach separate sheet if necessary)

Office: _____ Address: _____

Office: _____ Address: _____

State the names and titles of all other Principals, Partners or Corporate Officers/ of your firm: (attach separate sheet if necessary)

Name: _____ Title: _____

Name: _____ Title: _____

List the names and addresses of all branch offices or other firms in which you are a principal, partner or corporate officer:

Office: _____ Address: _____

Office: _____ Address: _____

Are you, or is any 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 firms in which you are a sole proprietor, general partner or corporate office been adjudged bankrupt in the past three (3) years? Yes ____ No ____

If yes, specify the places(s) and date(s) of such action, and detail the circumstances relating thereto:

Have you or your firm been found in violation of state real estate licensing regulations within the last three (3) years?
If yes, provide details: _____

Are there now, or have there been any pending or unresolved complaints within the past three (3) years against you or the firm with which you have been associated, before any agency of government? Yes _____ No _____
If yes, provide details: _____

Have you or your firm been convicted, adjudged, or otherwise recorded as guilty by a final judgment of any court of competent jurisdiction of a felony or other crime? If yes, provide details: _____

SECTION IV – MEETING/EXCEEDING YOUR NEEDS (OPTIONAL):

What are 3 ways we can make your experience with us exceptional and meet/exceed your needs?

1. _____

2. _____

3. _____

SECTION V - (ALL APPLICANTS MUST SIGN):

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, will be grounds for revocation of my membership if granted. I further agree that, if accepted for membership in the Board, I will pay the fees and dues as from time to time established.

NOTE: *Payments to the Sheboygan County Board of REALTORS® are not deductible as charitable contributions. Such payments may, however, be deductible as an ordinary and necessary business expense.*

DUES AND FEES ARE NON-REFUNDABLE

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.

Who will be paying the membership dues? Broker Realtor/Affiliate

I prefer to receive Membership Dues Invoices via (check one): Email Mail

Applicant Name: _____

Applicant Signature: _____

Date Signed: _____