

2012-13 DMAR APPLICATION FOR MEMBERSHIP

4300 East Warren Avenue | Denver, Colorado 80222 | 303-756-0553 | FAX 303-756-0669

Name:	□ □ □ □ □ □ Mrs. □ Dr. Mr.
Company:	Phone:
Fax: E-mail:	
Address:	
City: State:	Zip:
	Cell Phone:
City: State: Zip:	
	eferred billing: Mail E-mail
Professional Designations held: GRI MRE CRS ABR Other:Office web address:	
	with office:
How many years have you been an active broker: Broker Associate: Apprai	
Specialty: Residential Commercial Property Management Other Are you engaged in another business or profession? Yes No If yes, what:	
I hereby apply for REALTOR® Membership in the Denver Metro Association of REALTORS® and enclo fee plus a prorated amount of the annual dues, which I understand will be returned to me in the even Board of Directors. In the event my application is approved, I agree as a condition of membership to course required by the Denver Metro Association of REALTORS®; and to otherwise on my own initiat Code of Ethics of the National Association of REALTORS® (NAR), including the duty to arbitrate busin of Ethics and Arbitration Manual of the Board and the Constitutions, Bylaws, and Rules and Regulation REALTORS®, the Colorado Association of REALTORS® (CAR), and the National Association of REALTO factorily complete a reasonable and non-discriminatory written examination covering such Code, Cor and duty to arbitrate. I further understand and agree that failure to comply with the above stated te from date of application will result in forfeiture of the \$125.00 application fee, all Association service further agree that my act of paying dues shall evidence my initial and continuing commitment to abic Constitutions, Bylaws, Rules and Regulations, and duty to arbitrate, all as from time to time amende Association to invite and receive information and comment about me from any Member or other persomment furnished to the Association by any Member or other person in response to any such invita privileged and not form the basis of any action by me for slander, libel, or defamation of character.	ent my application is not accepted by the complete the orientation and ethics ive thoroughly familiarize myself with the ness disputes in accordance with the Code ons of the Denver Metro Association of DRS® (NAR). I further agree to satisfictutions, Bylaws, Rules and Regulations, rms and conditions within three months s, and a portion of the annual dues. I de by the aforementioned Code of Ethics, d. Finally, I consent and authorize the son, and I agree that any information and
Application Fees: (Please check the appropriate box.) □ Designated REALTOR® (Responsible Broker or Appraiser) □ REALTOR® (Broker or Appraiser Associate) □ Secondary REALTOR® (Primary membership with another Association)	\$125.00
Ethics and Orientation Class - \$60	_ \$
Annual Dues – see dues proration	\$
(Prorated based on fiscal year 10/1/11 through 9/30/12)	
	TOTAL:

I, the undersigned, agree to pay the established fees as long as I remain a member of the Denver Metro Association of REALTORS[®]. I understand that if I fail to meet the requirements of membership, my application fee and prorated annual dues will be forfeited. I understand that this application and fees include membership in the Colorado Association of REALTORS[®] and the National Association of REALTORS[®]. I also understand that these fees are non-refundable.

I have read and understand the requirements of membership in the Denver Metro Association of REALTORS®. 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, may be grounds for revocation of my membership if granted.

By signing below I consent that the REALTOR® Associations (local, state, national) 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 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.

Signature: Date:		
NOTE: Applicant acknowledges that if accepted as a member and he/she subsequently resigns or is expelled from membership in the Denver Metro Association of REALTORS® with an ethics complaint or arbitration request pending, the Board of Directors may condition renewal of membership upon applicant's verification that he/she will submit to the pending ethics or arbitration proceeding and will abide by the decision of the Hearing Panel; or if applicant resigns or is expelled from membership without having complied with an award in arbitration, the Board of Directors may condition renewal of membership upon his/her payment of the award, plus any costs that have previously been established as due and payable in relation thereto, provided that the award and such costs have not, in the interim, been otherwise satisfied. I further agree that if I resign or otherwise cause membership to terminate, the duty to submit to arbitration continues in effect even after membership lapses or is terminated, provided that the dispute arose while I was a REALTOR®.		
Are you now a member of any other real estate Board/Association? ☐Yes ☐No		
If yes, give the name of the Board/Association:	_	
Have you ever held membership in any other real estate Board? ☐Yes ☐No		
If yes, give the name of the Board/Association:		
Member From (date): Zip: Zip:		
Have you completed the NAR Ethics Class through another real estate Board/Association? ☐Yes ☐No		
If yes, please give date of completion:		
Are you presently financially indebted to any former Board/Association? Yes No If yes, please explain: No		
Are you subject to unresolved professional standards or arbitration hearings of this or any other Board/Association? Yes No If yes, please explain:		
Payment Information: Usa MC AMEX Discover Card Number:		
APPLI CANTS FOR DESI GNATED REALTOR® ONLY:		
Company Information: 🗖 Individual 🗖 DBA 📮 Partnership 📮 Corporation Other:		
Your Position: ☐ Principal ☐ Partner ☐ Corporate Officer ☐ Trustee Other:		
Names of Principals/Partners/Officers/Trustees of your firm:		
Is the Office Address, as stated, your principal place of business? □Yes □No		
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 sole proprietor, general partner or corporate officer been adjudged bankrupt in the past three (3) years? Yes If yes, specify the place(s) and date(s) of such action, and detail the circumstances on a separate sheet of paper.		
Do you hold, or have you held, a real estate license in another state?		
Has your real estate license, in this or any other state, been suspended or revoked? Yes No If yes, where and when?		
Are there now any pending or unresolved complaints, or have there been within the past three (3) years, any complaints against you or the firm with which you have been associated before any real estate regulatory agency or any other agency of government?		
If yes, specify the substance of each complaint in each state, the agency before which complaint was made, and the current status or resolution of such complaint on a separate sheet of paper. I understand as Designated BROKER® I am responsible for dues established annually by the Board of Directors for myself, plus an amount times the number of real estate licensees employed by or affiliated with my firm or office who are not themselves REALTOR® members of the Association.		
Signature: Date:	<u>-</u>	