



GREATER LEWISVILLE ASSOCIATION OF REALTORS®

997 S. Edmonds Lane, Lewisville TX 75067
Office: (972) 221-4606 Fax: (972) 436-2184

APPLICATION FOR REALTOR® MEMBERSHIP

Office Use Only Line

MMSI #: _____

NRDS #: _____

SECTION I

APPLICANT INFORMATION:

(Must be completed by all applicants)

Applicant's Name: _____
(Exactly as shown on your Texas Real Estate License)

Nickname used or preferred name: _____

PERSONAL INFO:

MAILING ADDRESS: _____

PHYSICAL ADDRESS (if different): _____

Home PH#: _____

Cell PH#: _____

Agent Fax#: _____

Emergency Contact PH#: _____

Emergency Contact Name: _____ Relation: _____

BUSINESS INFO:

SPONSORING BROKER: _____

FIRM NAME: _____

ADDRESS: _____ CITY/STATE/ZIP: _____

Business PH#: _____ Fax Phone#: _____

Your Direct Work PH# & Extension: _____

Circle One: Preferred Contact PH #: Cell Office Direct Work Home
(This number will print out on your MLS customer reports)
Preferred Mailing: Home Office

Type of License: Broker ___ Salesman ___ Other ___ TREC LICENSE # _____

ATTACH COPY OF CURRENT Driver License & REAL ESTATE LICENSE FOR YOUR MEMBER FILE

Circle One: PRIMARY MEMBER with MLS PRIMARY MEMBER with out MLS SECONDARY MEMBER
MLS ONLY MEMBER and/or TRANSFERRING ASSOC.MEMBERSHIP

Please indicate if you are the Office Manager? Yes or No

An e-mail address is required so that notifications may be sent from this Association Office
(NOTE: An active, accurate e-mail address is also required by the NAR & TAR Associations)

* BUSINESS E-MAIL: _____

* WEB PAGE: _____

* PERSONAL E-MAIL: _____

***I authorize the Greater Lewisville Association of REALTORS®, Inc. to contact me via phone, fax & e-mail at the phone, fax numbers & e-mail addresses listed above.**

*** Initial your response: ___Yes ___No**

SECTION II

I hereby apply for REALTOR® (Primary, Secondary, circle one) membership in the Greater Lewisville Association of REALTORS® and enclose my check in the amount of \$_____, I agree as a condition to membership to complete the orientation course for the above named Association if I am a Newly Licensed REALTOR® by the Texas Real Estate Commission (TREC), if any, and otherwise on my own initiative to thoroughly familiarize myself with the "Code of Ethics", of the NATIONAL ASSOCIATION OF REALTORS®, including the duty to arbitrate contractual and specific non-contractual disputes in accordance with Article 17 of the Code of Ethics and the Code of Ethics / Arbitration Manual of the National Association of REALTORS®, and the constitution, Bylaws, and Rules and Regulations of the National Association of REALTORS® (NAR), the State Association (TAR), and the Bylaws of the Greater Lewisville Association of REALTORS®. I further agree that my act of paying dues shall evidence my initial and continuing commitment to abide by the aforementioned Code of Ethics, Constitution, Bylaws and Rules and Regulations, and duty to arbitrate, all as from time to time to amended.

***Initial: _____**

Applicant acknowledges that the Association will maintain a file of information that may be shared with other boards/associations where applicant subsequently seeks membership. This file shall include previous applications of membership; all final findings of Code of Ethics violations and violations of other membership duties within the past (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 request; and information related to unpaid arbitration awards or unpaid obligations to the Board or its Multiple Listing Service (MLS).

***Initial: _____**

Applicant acknowledges that if accepted as a Member and he/she subsequently resigns or is expelled from membership in the Association 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 proceedings 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 been established previously as due and payable in relation thereto, provided that the award and such costs have not, in the interim, been otherwise satisfied.

***Initial: _____**

***NOTE: Dues payments to the Board are not tax deductible as charitable contributions. Portions of such payments may be tax deductible as ordinary and necessary business expenses.**

SECTION III

1). Are you currently a member of another Board/Association which is affiliated with the National Association of REALTORS® or have you held membership in another Board/Association?
YES or NO

If yes, complete the following:

Name of Board/Association in which you held membership(s):

Type of Membership: _____ NRDS# _____
(if known)

Approximate dates: _____

2). Have you participated in a Multiple Listing Service (MLS) which is owned and operated by a Board Affiliated with the National Association of REALTORS®? Y or N

If yes, complete the following:

Name of each Multiple Listing Service: _____

Approximate dates of participation: _____

3). Do you hold, or have you ever held a real estate license in another state? Y or N

If yes, provide the state name and your license number: _____

4). Is the Real Estate Business your main occupation? ____Yes ____ No

If no state your main occupation: _____

5). Education History:

Name & City, State of High School _____

Name & City, State of College or University _____

By signing below I hereby certify 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.

I also agree that, if accepted for membership in the Board/Association, I shall pay the fees and dues as from time to time established.

Signature: _____ Date of Application: _____

Broker Signature _____ Date _____
Designated REALTOR,
or Other Authorized Signature

STAFF USE ONLY: JOIN DATE: _____
RECEIVED BY: _____ NRDS# _____

GREATER LEWISVILLE ASSOCIATION OF REALTORS®

997 S. Edmonds Lane Lewisville, TX 75067 (972) 221-4606

1) **NEW MEMBER ORIENTATION:** I understand that to remain a Member in Good Standing receiving MLS and Supra Key privileges, I must attend an orientation within 45 days of joining the Association. I understand that I am scheduled to attend the next orientation on _____ and if I am unable to attend I will notify the GLAR office at (972) 221-4606 to be rescheduled to the next scheduled class. Failure to attend will result in loss of services until such time that I complete the required orientation. *** (Initial)

2) ***CODE OF ETHICS: I UNDERSTAND THAT I AM REQUIRED TO COMPLETE A 2 1/2 HOUR CODE OF ETHICS COURSE ON OR BEFORE I AM SCHEDULED TO ATTEND NEW MEMBER ORIENTATION. I MUST COMPLETE THE CODE OF ETHICS BY:** _____.

Code of Ethics is offered at various times throughout the year at the Association office for a nominal fee, and it is also available on-line on the National Association of REALTORS® web-site at www.realtor.org. *** (Initial)

3) **NTREIS (NORTH TEXAS REAL ESTATE INFORMATION SYSTEMS):** I understand that I am to receive MLS service and that I am to complete a 2 1/2 hour NTREIS Listings Online training prior to receiving access to the MLS system. I understand that the completion of this online training will be verified by the Association through the 360 Training site prior to receiving access to the system. *** (Initial)

4) I must provide the Association (GLAR), with proof of the completion of both the online Code of Ethics and NTREIS training before I will receive my MLS password. If I do not provide confirmation that I have completed both of the online training for NTREIS MLS & Code of Ethics I am aware that my MLS & Supra Keycard services will be interrupted. Or if you have completed your Code of Ethics and/or MLS training at another Board of REALTORS® you are required to provide GLAR proof of the completion date and location. Date _____ Location _____ where course was taken. (You will receive your MLS password via the email address you supplied GLAR on your application for membership or you can receive your password in person at the GLAR office). *** (Initial)

5) **NTREIS Rules & Regulations:** Section 9.07 Participants, Subscribers, and Ancillary Users shall not furnish to, disclose to, or permit the use of their MLS passwords and or access codes to the MLS by any person, firm, company, or other entity, except as may be authorized from time to time by the Directors. Any violation of this section by a Participant, Subscriber, or Ancillary User will subject the violators to loss of MLS services in addition to any other sanctions authorized by these rules or Policies of the Code of Ethics. I have read the above and understand that the sharing of my login/password may result in loss of MLS service. (Each quarter you will pay your Broker for the MLS. There maybe a 25% processing fee if paid directly to GLAR). *** (Initial)

6) **SUPRAKEY SERVICE:** I understand that I will be invoiced annually via email from the MetroTex Association of REALTORS® (accounting@dfwrealtors.com) for the key service that I select (dKey, eKey Basic, or eKey Professional) in accordance with the current rates and requirements established with the appropriate Key sublease agreement. My Annual key service fee must be paid to MetroTex on or before June 30th to avoid interruption of service. If the fees are not paid in accordance with the agreement and/or invoice, key privileges will be discontinued until such time all fees are paid, including a reinstatement fee. I understand that the Supra equipment and/or software is provided to me by a lease agreement, and all such equipment will be returned to GLAR within 5 days of request by the association upon termination of membership or for non-payment. I further understand that the access to the software will be discontinued upon termination of membership. I may contact the MetroTex Association of REALTORS® by calling the accounting staff at (214) 637-6660. *** (Initial)

7) **ANNUAL ASSOCIATION DUES:** In accordance with the policy guidelines set forth by the National Association of REALTORS®, the Texas Association of REALTORS®, and the Greater Lewisville Association of REALTORS®, annual dues are invoiced directly to me during the month of October each year and are **DUE UPON RECEIPT**. As a member of this Association, I know that any dues **not paid on or before December 1st of the current year**, will be assessed a **late/processing fee** for any payment made after this date. *** (Initial)

By signing below I am acknowledging that I have read and understand all statements above that apply to me as member of the Greater Lewisville Association of REALTORS®, Inc.

(Signature) (Date) (Company Name)

(Printed Name) (Contact Phone Number)

JOIN DATE: _____ (GLAR STAFF ONLY)

TO: ALL ASSOCIATION MEMBERS!

FROM: The Greater Lewisville Association of REALTORS®, Inc

**SUBJECT: Change of Personal Mailing or Physical Address, E-mail,
 Phone Numbers, Company Change, Status Change as an Agent**

As with any businesses or places of employment, our Association offices, which are GLAR, TAR, NAR, & MLS (NTREIS), must keep current, accurate records for each member in their member files and in their computer databases. Keeping your addresses (both mailing & physical), phone numbers, and e-mail addresses current allows us to effectively communicate with you any updates, changes, upcoming events, licensing renewals, newsletter e-mails, educational opportunities, and any other notifications that effect you as a REALTOR® or Affiliate member.

You must notify our Association office if you transfer to another Association, your licensing status changes (ie: go inactive, become a Broker, etc), if you change phone #'s or change offices or companies, or your physical home address changes (NAR & TAR require we have a physical address for you even if you use a P.O. Box for mailing).

By signing below, I acknowledge that I have read and understand that it is my responsibility to notify the Association office of any changes in my agent status, phone numbers, my physical and e-mail addresses, or of anything that may affect me as an Association member and my ability to be contacted by or receive communications from these organizations.

(Signature)

(Date)

(Print Name)