



## APPLICATION FOR REALTOR® MEMBERSHIP



I hereby apply for REALTOR® Membership in the **Southeast Arizona Association of REALTORS®** enclosing required payment. I understand that my **dues** and the **application fee** are **nonrefundable**. I will attend orientation within **120 days** of the first full month following my application for REALTOR® membership, which will include the NATIONAL ASSOCIATION OF REALTORS® Code of Ethics training. Failure to meet these requirements may result in having my membership terminated. I agree to abide by the Code of Ethics of the NATIONAL ASSOCIATION OF REALTORS®, which includes the duty to arbitrate (or to mediate if required by the association) and the Bylaws and Rules and Regulations of the **Southeast Arizona Association of REALTORS®** the Arizona Association of REALTORS® and the National Association of REALTORS®. I understand membership brings certain privileges and obligations that require compliance. I understand that I will be required to complete Code of Ethics training as specified in the association's bylaws as a continued condition of membership.

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

### PERSONAL INFORMATION:

First Name:		Middle Name:			
Last Name	Jr	III	Sr	Other:	
Nickname:					
Mailing Address:					
City:		State:		Zip:	
Date of Birth:			Languages Spoken:		
Home Phone:			Cell Phone:		
E-mail Address:					
Real Estate License #			Expiration Date:		
Choose your ID for computer access it must begin with samls.	samls.		Password:		
Minimum of 6 characters			Minimum of 6 characters		

**COMPANY INFORMATION:**

Office Name: \_\_\_\_\_

Office Address: \_\_\_\_\_

Office Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

**APPLICANT INFORMATION:**

Are you currently a member of any other Association of REALTORS®? YES NO

If yes, name of Association \_\_\_\_\_

Type of membership held: \_\_\_\_\_

Have you previously held membership in any other Association of REALTORS®? YES NO

If yes, name of Association \_\_\_\_\_

Type of membership held: \_\_\_\_\_

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): \_\_\_\_\_

If you have ever been a REALTOR®, indicate your NAR membership (NRDS) #: \_\_\_\_\_

Last date (year) of completion of NAR's Code of Ethics training requirement: \_\_\_\_\_

Have you ever been refused membership in any other Association of REALTORS®? YES / NO (If yes, provide details): \_\_\_\_\_

Do you hold, or have you ever held, a real estate license in any other state? YES NO

If yes, where: \_\_\_\_\_

Have you (or, for Designated REALTORS®, your firm) been found in violation of state real estate licensing regulations or other laws prohibiting unprofessional conduct rendered by the courts or other lawful authorities within the last three years?

YES NO

If yes, provide details: \_\_\_\_\_

Have you or your firm been convicted of a felony or other crime?

YES NO

If yes, provide details: \_\_\_\_\_

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 Southeast Arizona Association of REALTORS® are **NON-REFUNDABLE** and not deductible as charitable contributions. Such payments may, however, be deductible as an ordinary and necessary business expense. I hereby acknowledge that SAAR, AAR, and NAR are authorized to distribute a member’s name, company name, business address, email address, company name, business address, email address, company phone and FAX number on their respective websites. **(NO PERSONAL INFORMATION IS PUBLISHED). Members agree to notify SAAR immediately if their information changes.** By signing below, I consent that the Southeast Arizona Association of REALTORS® , Arizona Association of REALTORS®, the National Association of REALTORS®, ARMLS, and their subsidiaries, if any, 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.

I also agree to attend the Code of Ethics class as mandated by the National Association of Realtors® and by the Southeast Arizona Association of REALTORS® every two (2) years. I also acknowledge this training is a condition of membership.

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

As Designated REALTOR® (Broker / Appraiser) of

\_\_\_\_\_ (office name), I concur with the signed statement of intent above.

\_\_\_\_\_ Signature: \_\_\_\_\_  
Print Name (Broker/Appraiser) Designated Broker/Appraiser Must Sign

## SOUTHEAST ARIZONA ASSOCIATION OF REALTORS®, INC.

Upon receiving your license from the Arizona Department of Real Estate or Appraiser Board, complete the Application for REALTOR® Membership. Your Designated REALTOR® must sign this form before you can join and be issued a Supra Key. **If you are a broker, joining the association for the first time, a one-time new office application fee is an additional \$150.00.**

1. **You must attend the SAAR Membership Orientation/Ethics Class, SAMLs Orientation Class.** There is no charge for these classes; however, you must complete the requirements within one hundred twenty (120) days of joining SAAR. Your SAAR membership is conditional until you complete these requirements. **Failure to attend the required courses within the specified time (120 days) will result in forfeiture of application fees and your membership will be terminated.** You will then be required to reapply for membership.
  
2. Investments are not deductible for federal income tax purposes. Investments to RAPAC are voluntary and are used for political purposes. You may refuse to invest without reprisal. 70% of each investment is used by RAPAC to support state and local candidates. The balance is sent to National RPAC to support federal candidates and is charged against your limits under 2 U.S.C. 441a. The REALTOR® Party Assessment (\$35 of the \$190) will automatically be directed to the REALTOR® Party. Those wishing to have their assessment applied to other purposes may specify in writing to [AZRP@aaronline.com](mailto:AZRP@aaronline.com) and it will be redirected to the Issues Mobilization Fund or the Arizona Association of REALTORS® Disaster Assistance Foundation (ARDAF).

	SAAR DUES						
	New Member	NAR Allocations		AAR	SAAR	TOTAL TO	TOTAL TO
	Application Fee	Mandatory Assessment	Allocations	Dues	REALTOR	BROKER	
<b>JANUARY</b>	\$100.00	\$120.00	\$35.00	\$190.00	\$400.00	\$845.00	\$995.00
<b>FEBRUARY</b>	\$100.00	\$110.00	\$35.00	\$190.00	\$370.00	\$805.00	\$955.00
<b>MARCH</b>	\$100.00	\$100.00	\$35.00	\$190.00	\$340.00	\$765.00	\$915.00
<b>APRIL</b>	\$100.00	\$90.00	\$35.00	\$190.00	\$310.00	\$725.00	\$875.00
<b>MAY</b>	\$100.00	\$80.00	\$35.00	\$190.00	\$280.00	\$685.00	\$835.00
<b>JUNE</b>	\$100.00	\$70.00	\$35.00	\$190.00	\$250.00	\$645.00	\$795.00
<b>JULY</b>	\$100.00	\$60.00	\$35.00	\$95.00	\$220.00	\$510.00	\$660.00
<b>AUGUST</b>	\$100.00	\$50.00	\$35.00	\$95.00	\$190.00	\$470.00	\$620.00
<b>SEPTEMBER</b>	\$100.00	\$40.00	\$35.00	\$95.00	\$160.00	\$430.00	\$580.00
<b>OCTOBER</b>	\$100.00	\$30.00	\$35.00	\$95.00	\$130.00	\$390.00	\$540.00
<b>NOVEMBER</b>	\$100.00	\$20.00	\$35.00	\$95.00	\$100.00	\$350.00	\$500.00
<b>DECEMBER</b>	\$100.00	\$10.00	\$35.00	\$95.00	\$70.00	\$310.00	\$460.00

**SAAR Fees please make check payable to: SAAR**

## SUPRA INFORMATION

1. You have the option of applying for a Supra Express Key. Carefully review the Terms and Conditions of the Lease Form (Provided at the Association Office)
2. To obtain a Supra Key, you must appear in person at SAAR. The Annual Express Key fee is prorated on a monthly basis, please refer to the Express Key Chart for the **estimated** amount due **before taxes**.
3. Payment for your Express Key is only with a **credit card**.

**\*\*\*\*SUPRA FEES ARE ESTIMATED AND SUBJECT TO CHANGE\*\*\*\***

Start date	End Date	2017-2018	2018-2019	Total fee due before tax	
05/15/18	06/09/18	37.78	0.00	37.78	2 months
06/10/18	06/14/18	37.78	221.88	259.66	2 months + next annual fee
06/15/18	07/14/18	18.89	221.88	240.77	1 month + next annual fee
07/15/18	08/14/18	0.00	221.88	221.88	12 months of annual fee
08/15/18	09/14/18	0.00	203.39	203.39	11 months
09/15/18	10/14/18	0.00	184.90	184.90	10 months
10/15/18	11/14/18	0.00	166.41	166.41	9 months
11/15/18	12/14/18	0.00	147.92	147.92	8 months
12/15/18	01/14/19	0.00	129.43	129.43	7 months
01/15/19	02/14/19	0.00	110.94	110.94	6 months
02/15/19	03/14/19	0.00	92.45	92.45	5 months
03/15/19	04/14/19	0.00	73.96	73.96	4 months
04/15/19	05/14/19	0.00	55.47	55.47	3 months
05/15/19	06/09/19	0.00	36.98	36.98	2 months
<b>The "Billing Pull Date" will be 35 days prior to the due date for your invoices. The next year's annual fees begin on <u>that date</u> because anyone who is issued a key on or after that day will not receive an invoice.</b>					
<b>Organization Name</b>	Southeast Arizona AOR				
<b>Annual Fee</b>	2017-2018	226.65			
	2018-2019	221.88			
<b>Annual Due Date</b>	15-Jul				
<b>Activation Fee</b>	75.00				
<b>Monthly eKEY Debit</b>	Basic	17.33			
	Professional	NA			
<b>Monthly Debit Date</b>	15th				
<b>eKEY Activation Fee</b>	50.00				

4. Important: REALTOR® membership with an Arizona Association and SAMLS membership are mandatory in order to obtain an Express.

**IF REQUESTING A KEY PLEASE COMPLETE THE ATTACHED CC AUTHORIZATION FORM  
FOR SUPRA BILLING**

**Supra Key Authorization form**

Today's Date: \_\_\_\_\_ Authorized Charge Amount \$ \_\_\_\_\_

Credit Card Type:

Visa \_\_\_\_\_ MasterCard \_\_\_\_\_ Discover \_\_\_\_\_ American Express \_\_\_\_\_

Credit Card Number: \_\_\_\_\_

Expiration Date \_\_\_\_\_ CVV# \_\_\_\_\_

Name on Credit Card: \_\_\_\_\_

Billing Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Zip Code \_\_\_\_\_

Phone Number ( )- \_\_\_\_\_ - \_\_\_\_\_

Email Address \_\_\_\_\_

**In the event that my credit/debit card is not honored, I/we agree to provide Southeast Arizona Association of Realtors a new Card or Certified funds in the amount required by the Association.**

Signature \_\_\_\_\_ Date \_\_\_\_\_