



325 S. Marion Avenue  
Sandpoint, Idaho 83864  
Phone (208) 265-2227  
Fax (208) 263-2153

## REALTOR® APPLICATION FOR MEMBERSHIP

Name \_\_\_\_\_ Real Estate License # \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone # \_\_\_\_\_ Home Fax # \_\_\_\_\_

Company \_\_\_\_\_

Office Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Office Phone # \_\_\_\_\_ Office Fax # \_\_\_\_\_

Cell Phone # \_\_\_\_\_ E-mail \_\_\_\_\_

Date of Birth: \_\_\_\_\_ *Please include/email a recent photo of yourself in JPG or PNG format.*

New application or reactivation of previous membership?      New \_\_\_\_\_      Reactivation \_\_\_\_\_

**Are you currently or have you previously been a member of this or any other Association of REALTORS®?**

Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, when and where? \_\_\_\_\_

**If yes, what is your NRDS number? (If known)** \_\_\_\_\_

Do you hold a real estate license in any other State? No \_\_\_\_\_ Yes \_\_\_\_\_ State(s)? \_\_\_\_\_

Do you have any pending arbitrations or hearings, violations or judgments against you for violating the Code of Ethics or for unprofessional behavior? No \_\_\_\_\_ Yes \_\_\_\_\_ If yes, please explain \_\_\_\_\_

Has your real estate or appraisal license ever been revoked? No \_\_\_\_\_ Yes \_\_\_\_\_ If yes, please explain \_\_\_\_\_

The above information is true and correct to the best of my knowledge. I understand that I must read and comprehend the Code of Ethics, Constitution, Bylaws, and Rules and Regulations of the Selkirk Association of REALTORS® and of the Idaho and National Associations of REALTORS®, and I agree to abide by same.

\_\_\_\_\_ Initial

I agree to complete the 2-1/2 hour on-line Code of Ethics training required by NAR® within 30 days of today's date. I understand that my access to the MLS system may be terminated if this training is not completed on time.

\_\_\_\_\_ Initial

I agree to attend the required New Member Orientations, including specifically the IR® and NAR® new member orientation and the Selkirk Association of REALTORS® New Member Orientation (held quarterly in the SAR® offices).

\_\_\_\_\_ Initial

I understand that by providing above my mailing address(es), e-mail address(es), telephone number(s), and fax number(s), I consent to receive communications sent from Selkirk Association of REALTORS®, Idaho and National Association of REALTORS® via U.S. mail, e-mail, telephone, or facsimile at those number(s)/locations(s).

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

