



REALTOR® MEMBERSHIP APPLICATION
ROCKINGHAM COUNTY REALTORS COUNCIL OF GRRA
 23 Oak Branch Drive
 Greensboro, NC 27407
 (336) 854-5868 Office (336) 292-5416 Fax



I hereby apply for membership in **the Greensboro Regional REALTORS® Association**. My check for the application fee in the amount of \$450.00 plus prorated dues is enclosed and will be returned to me if my membership application is denied less the handling charge. I understand that dues and fees are non-refundable and will not be returned after my application is accepted. If my application is accepted, I agree to abide by the Code of Ethics of the National Association of REALTORS®, the Constitution, & Rules and Regulations of the above named Association, the State Association, and the National Association of REALTORS®. I authorize the Association through its Directors, Committees, or Staff members to make such investigation of my character and credit, as it may deem advisable. I acknowledge, consent, and fully understand that information obtained as a result of investigation may be reported to the North Carolina Real Estate Commission. Further, I shall not use any information obtained or furnished in connection with such investigation as the basis of any legal action for slander, libel, or defamation of character. For adequate value received, I irrevocably waive and release all claims against the Association or any of its Officers, Directors, Members, or Staff for any action in connection with Association business, and particularly as to its or their act in approving or not approving, advancing, suspending, expelling, or otherwise disciplining me as an applicant or member. Upon the termination of my membership for any cause, I will discontinue the use of the designation REALTOR® and return to the Association all certificates, signs, seals, or other indications of membership.

I am applying for the following membership. Please check one:

- (BIC) DESIGNATED REALTOR® REALTOR®
 NON-MEMBER SALESPERSON

Full Name *(As Shown On License)* _____ Nickname _____

FIRM INFORMATION

GRRA/RCRC OFFICE USE ONLY

Firm Name _____ Firm MLS U.I.D. _____

Address _____ City _____ State _____ Zip _____

Office Phone _____ Office Fax _____

Affiliated With Present Firm on Date: _____

Previous Real Estate Firm Affiliation (and Dates): _____

PERSONAL INFORMATION

Home Address _____

City _____ State _____ Zip _____

Home Phone # _____ Cell Phone # _____ Other # _____

Email Address _____ Date of Birth _____

Real Estate License# _____ Certified Appraiser License# _____

Where Is Your License Displayed? _____

Preferred Mailing: Home Office

For Office Use Only:	Avecra _____	NM Report _____	MLS _____
	Supra _____	NAR _____	Other _____

HISTORY

Have you ever been a member of Rockingham County Realtor® Council/GRRRA? Yes No
If yes, do you remember when & with what company? _____

Have you ever been a member of another Realtor® Board? Yes No
If yes, where? _____

Please list dates of your membership at the Association: _____

May we contact the Association? No Yes

What is your NAR (NRDS) member number? _____

Please list any designations you have (GRI, ABR, etc.) _____

Do you speak a foreign language? If yes please list _____

Please list all specialties:

Residential Realty

Commercial Realty

Property Mgmt.

Building

Appraisals

Other _____

Are you interested in REALTORS Commercial Alliance Membership? Yes No

THE ADDITIONAL APPLICATION FEE OF \$250.00 IS WAIVED IF JOINING AT THIS TIME. YOU MUST PAY THE RCA PRORATED ANNUAL DUES OF \$75.00 WITH APPLICATION. (PLEASE COMPLETE THE RCA APPLICATION)

The following questions apply only to Principals/Designated REALTORS of real estate firms:

of Employees in firm? _____ # of Salespeople? _____ # of Brokers? _____

Are you now being or have you ever been investigated or charged with any violations by the NC Real Estate Commission or any real estate commission in any other state? No Yes

Have you ever been convicted of a felony? No Yes

IF YES TO EITHER QUESTION ABOVE, PLEASE GIVE DETAILS ON ANOTHER PAGE.

Does your firm have a parent firm or subsidiary which engages in brokerage? Yes No.

If yes, where? _____

List all principals, partners, and/or corporate officers of your firm: (Star ones that hold a NC Real Estate License):

MULTIPLE LISTING SERVICE

MLS FEES SCHEDULE:

MLS SERVICE

\$350/half-year

This fee is prorated by month services are set up.

A condition of access to MLS is to agree to submit to ethics hearings and arbitration requests.

Further, I agree to abide by the Rules & Regulations of the Triad Multiple Listing Service and the MLS Policy Manual of the Greensboro Regional REALTORS® Association, Inc., and that I am fully accountable and liable for any violations of these Rules & Regulations by me or by any of my associates.

Signature _____ Date _____

PLEASE ATTACH APPLICATION FEE AND APPROPRIATE DUES:

REALTOR® Application Fee: \$450.00

PRORATED LOCAL, STATE, & NATIONAL DUES: (*NON-MEMBER SALES FEES ARE NOT PRO-RATED*)

	Total	Local	State	National	NAR Fee	NMS
January	\$ 530.00	180.00	165.00	150.00	35.00	605.00
February	\$ 483.75	160.00	151.25	137.50	35.00	605.00
March	\$ 437.50	140.00	137.50	125.00	35.00	605.00
April	\$ 391.25	120.00	123.75	112.50	35.00	605.00
May	\$ 585.00	100.00 240.00	110.00	100.00	35.00	605.00
June	\$ 538.75	80.00 240.00	96.25	87.50	35.00	895.00
July	\$ 492.50	60.00 240.00	82.50	75.00	35.00	895.00
August	\$ 446.25	40.00 145.00	68.75	62.50	35.00	895.00
September	\$ 400.00	20.00 240.00	55.00	50.00	35.00	895.00
October	\$ 353.75	240.00	41.25	30.00	35.00	605.00
November	\$ 657.50	220.00	27.50 165.00	25.00 150.00	35.00 35.00	895.00
December	\$ 611.25	200.00	13.75 165.00	12.50 150.00	35.00 35.00	895.00

****Multiple Listing Service Fees are not included****

Contact the Association regarding Supra Activation and monthly fees

Application Fee (NMS waived)	\$	Check #	
Prorated Dues	\$	Visa/MC/AMX	
Semi- Annual MLS Service	\$	Exp. Date	
Optional			
Supra Phone Activation	\$		
Supra Monthly Phone Fee	\$		
Supra Display Key	\$		
TOTAL DUE	\$		

DUES & FEES ARE NON-REFUNDABLE

Revised: 12/2016

I agree to pay the established dues as long as I remain a member and acknowledged that present dues are \$145 annually. Dues payments to the Association are not tax deductible as charitable contributions. However, portions of such payments may be tax deductible as ordinary and necessary business expenses. I give the Association the right to email, fax, call or text member regarding Association business.

I certify that all information furnished on this application is true, correct and I understand and 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.

Signature of Principal/DR

Date