**REALTOR® Membership Application**

**Great Plains Association of REALTORS®**

210 S. Ohio Street, Salina, KS 67401 ̶ Phone: (785) 825-4607

**Please complete application and return with a copy of your license or certification.**

Check membership type desired: Designated REALTOR(Principal Broker) REALTOR

GPAR will be my:  Primary Association

Secondary Association (My Primary Association is:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

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

Name of Firm/Office:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City County State Zip

Office Phone: (\_\_\_\_\_\_\_)\_\_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_\_ Home Phone: (\_\_\_\_\_\_\_) \_\_\_\_\_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_

Office Fax: (\_\_\_\_\_\_\_\_)\_\_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_\_ Cell Phone: (\_\_\_\_\_\_\_) \_\_\_\_\_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_

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

Home Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  City State Zip

What type of license do you hold with the Kansas Real Estate Commission or Kansas R.E. Appraisal Board?:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

License Number(s):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date License was issued: \_\_\_/\_\_\_/\_\_\_

Date of Birth: \_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_

Month Day Year

In which of the following categories of real estate will you be actively engaged:

Residential  Commercial  Appraisal

Have you ever been a member of GPAR?:  No  Yes; what year(s)?:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you or do you hold Membership in another Association of REALTORS®?:  No Yes; what Association(s), type of membership and year(s)?:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If you are now or have ever been a REALTOR®, please indicate your NAR membership (NRDS/M1): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Please turn over)*

If applicable, what date did you last complete your Code of Ethics class:\_\_\_\_\_\_/\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_

Has your membership in an Association of REALTORS® ever been (voluntarily or involuntarily) refused, suspended or terminated?:  No  Yes; attach additional page with full explanation

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?:

No  Yes; attach additional page with full explanation

Have you been convicted of a felony or other crime?:  No  Yes; please explain:\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

In what other business have you been engaged in for the past five (5) years?:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, hereby apply for Membership as indicated in the Great Plains Association of REALTORS®. Inc. (GPAR) and submit my check/cash in the amount of $\_\_\_\_\_\_\_\_\_\_\_\_\_\_, which I understand will not be returned to me. In the event my application is approved, I agree, as condition of Membership to thoroughly familiarize myself with the Code of Ethics of the National Association of REALTORS®, including the duty to arbitrate business in accordance with the Code of Ethics, and the Constitution, Bylaws, Rules and Regulations of GPAR, Kansas Association of REALTORS® and the National Association of REALTORS®. I further agree to attend a New REALTOR® Orientation and complete a New Member Code of Ethics class within one-hundred-eighty (180) days upon confirmation of membership to GPAR and understand that failure to complete requirements within established timeframe may result in membership being revoked as per the association’s bylaws. I further agree that my act of paying dues shall be evidence of my initial and continuing commitment to abide by the aforementioned Code of Ethics, Constitution, Bylaws, Rules and Regulations and duty to arbitrate, all as time to time amended.

**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 the 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 the applicant was a REALTOR®.

I hereby certify that the foregoing information furnished is true and correct, and I agree that the failure to provide complete and accurate information as requested, or any misstatement of fact, shall be grounds for revocation of my Membership.

**Signature:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:**\_\_\_\_\_\_/\_\_\_\_\_\_/\_\_\_\_\_\_\_

**Please Note: Application Fees/Dues are non-refundable.**

**New Realtor Orientation Agreement**

**Great Plains Association of REALTORS®**

210 S. Ohio Street, Salina, KS 67401 ̶ Phone: (785) 825-4607

**I UNDERSTAND AND AGREE TO THE FOLLOWING STATEMENTS:**

I agree that I will complete the NAR (National Association of REALTORS®) online New Member Code of Ethics course within thirty (30) days of membership. A copy of your certificate **must** be sent to Great Plains Association of REALTORS® AE at, [greatplainsae@gmail.com](mailto:greatplainsae@gmail.com) once completed.

Please Initial Here:\_\_\_\_\_\_\_\_\_\_

I agree that I will complete the mandatory New Member Orientation class within **180 days** of membership. If classes are not available before my 180th day, then YOUR BROKER is RESPONSIBLE for the completion of your orientation.

Please Initial Here:\_\_\_\_\_\_\_\_\_\_

I agree that if I fail to complete both the mandatory New Member Orientation class and online Code of Ethics course my membership with GPAR will automatically terminate.

Please Initial Here:\_\_\_\_\_\_\_\_\_\_

I agree all dues/fees are non-refundable, and suspension or termination of my membership and MLS access does not entitle me to a refund. I agree that all bills will be paid by due date and suspension of MLS privileges will be determined by the MLS board, AE or by GPAR staff.

Please Initial Here:\_\_\_\_\_\_\_\_\_\_

Applicant Name (Print):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_/\_\_\_\_\_\_/\_\_\_\_\_