



Helena Association of REALTORS®
 2707 Colonial Drive
 Helena, MT 59601
 Phone: 406-603-4793



Return application to: Bonnie@HelenaHar.com

APPLICATION FOR MEMBERSHIP

I hereby apply for REALTOR® **Primary** or **Secondary** membership in the above named Association, and enclose my check in the amount of **\$150** for a one-time application fee and \$_____ * for my yearly dues payable to the Helena Association of REALTORS®. I understand this payment will be returned to me in the event of non-election. If my application is approved, I agree to abide by the Code of Ethics of the National Association of REALTORS®, which includes the duty to arbitrate, and the Constitutions, Bylaws, and Rules and Regulations of the above named Board, the State Association, and the National Association. I further agree to complete satisfactorily a reasonable and nondiscriminatory examination covering such Code, Constitutions, Bylaws, Rules, and Regulations. I understand membership brings certain privileges and obligations that require compliance. Membership is final only upon approval by the Board of Directors and may be revoked should completion of requirements, such as orientation, not be completed within the time frame established in the Association’s Bylaws. I understand that I will be required to complete periodic Code of Ethics training as specified in the Associations’ Bylaws as a continued condition of membership.

Applicant acknowledges that if accepted as a member and they subsequently resign from the Association or otherwise cause membership to terminate with an ethics complaint pending, the Board of Directors may condition renewal of membership upon applicant’s certification that they 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 the applicant was a REALTOR®.

*Amount shown is prorated according to the month joining

I hereby submit the following information for your consideration:

Name as shown on license _____

License Number _____ Date of issuance _____

Specify: Broker Salesperson Appraiser Property Manager Other _____

Office Name _____

Office Mailing Address _____

Office Phone _____

Home Address (physical) _____

Home Address (mailing) _____

E-mail Address _____

City _____ State _____ ZIP Code _____

Preferred Phone _____ First name you prefer _____

Preferred Mailing and Publication: Home Office

Have you ever been refused membership in any other Association of REALTORS®? Yes No *(If yes, please provide details as an attachment)*

Has your real estate or appraisal license, in this or any other state been suspended or revoked? Yes No *(If yes, please provide details as an attachment)*

Do you hold, or have you held, a real estate license in any other state? Yes No

If yes, specify state _____

If you have been a REALTOR® previously, please provide your NRDS ID number _____

If you are a Designated REALTOR® or Broker/Owner of your firm, please provide the following information:

Company type: Sole Proprietor Partnership Corporation LLC (Limited Liability Company)

Other (please specify) _____

Your position: Principal Partner Corporate Officer Majority Shareholder Branch Office Manager

Other (please specify) _____

Is the Office Address, as stated, your principal place of Business? Yes No

If not, or if you have any branch offices, please indicate and give address:

Have you or your firm been convicted, adjudged, or otherwise guilty by a final judgment of any court of competent jurisdiction of a felony or other crime? Yes No

If yes, please provide details:

Have you or your firm been found in violation of state real estate licensing regulations within the last three (3) years? If yes, please provide details:

Are you a member of another Montana State REALTORS® Association? If so, please list:

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 Association, I shall pay the dues and fees as from time to time established. I understand that payments of dues and fees to the Helena Association of REALTORS® are not deductible as charitable contributions. Such payments, however, may be deductible as an ordinary and necessary business expense. No refunds.

By signing below, I consent that the REALTOR® Associations (local, state, and national) and their subsidiaries, if any (e.g. Helena MLS) may contact me at the specified address, telephone number, e-mail 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. This consent recognizes that certain state and federal laws may place limits on communications that I am waiving to receive all communications as part of my membership.

____ Yes, please sign me up for SentiLock!

SentriLock dues are not prorated and will be an additional \$180 . These dues are billed in June and not included in your January renewal HAR membership dues.

Signature: _____ Date: _____