

Member from (date) _____ To (date) _____

City _____ State _____ Zip _____

Have you completed the NAR Ethics Class through another real estate Board/Association? Yes _____ No _____

If yes, please give date of completion _____ Ethics _____

Are you presently financially indebted to any former Board/Association? Yes _____ No _____

If yes, please explain _____

Are you now subject to an unresolved professional standards or arbitration hearing award of this or any other Board/Association?

Yes _____ No _____

If yes, please explain _____

REALTOR® Association Marketing Consent Form

I understand that by providing my mailing address(es), email address(es), telephone number(s), and fax number(s), I consent to receive communications sent from Lenawee County Association of REALTORS®, and NATIONAL ASSOCIATION OF REALTORS® via U.S. Mail, email, telephone or facsimile at those number(s)/location(s)

Signature: _____ Date: _____

Payment

Visa _____ MC _____ Card # _____

Credit Card Expiration date: Month _____ Year _____ Verification Code _____

Signature _____

Please mail/email/or fax application and payment to:

**Lenawee County Association of REALTORS®
PO Box 425
Adrian, MI. 49221
Fax: (517) 263.0821
Email: lwolfe@LCARlive.com**

NOTE: Applicant acknowledges that if accepted as a member and he/she subsequently resigns form membership in the LCAR with an ethics complaint or arbitration request pending, the Board of Directors may condition renewal of membership upon applicant's verification that he/she will submit to the pending ethics or arbitration, the Board of Directors may condition renewal of membership upon his/her payment of the award, plus any costs that have previously been established as due and payable in relation thereto, provided that the award and such costs have not, in the interim, been otherwise satisfied.

I further agree that if I resign or otherwise cause membership to terminate the duty to submit to arbitrate continues in effect even after membership lapses or is terminated, provided that the dispute arose while I was a REALTOR®

Designated (Responsible) REALTORS® only: I understand and agree that as Designated REALTOR® (DR) of the above-named real estate office of appraisal office, I am fully responsible for all dues and fees for services that I request and receive prior to completing the Association's required membership application process. I also understand and agree that if accepted for membership, I will pay all dues and fees as are from time to time established and that the total amount of dues for which I will be personally and individually liable and responsible, as DR of the firm or office named herein, shall be in such amount as established annually by the Lenawee County Association of REALTORS® for myself, plus an amount times the number of real estate licensees or certified appraisers employed by or otherwise affiliated with my firm or office who are not themselves REALTORS® members of the Association. I further understand that if I apply for participation in the Multiple Listing Services, that I, as the DR, am an individual member of the MLS and as the participant am responsible for all dues and fees for MLS service.

Signed _____ DATE _____