



___ New Agent ___ New Broker ___ New REALTOR® Office

**Previous Association member Yes___ No ___ **Previous NRDS#_____

Office Of:

Form with fields: Office, Broker, Phone, E-Mail, Birth Date, First Name, MI, Last Name, Nickname M/F, Home Address, City, Zip, Home Phone, Home Fax, Cell

LANGUAGE BANK — Languages Spoken _____

Designations and Certifications—Please circle all that apply

ABR ABRM ALC CCIM CIPS CPM CRB CRS CRE GAA Green GRI PMN RCE RAA SRES SIOR AHWD E-PRO REPA RSPS TRC

Table with columns: REALTOR® Dues, Jan, Feb, Mar, Apr, May, June. Rows: Local—TPCAR, WR, NAR, Application Fee, Total

Table with columns: REALTOR® Dues, July, Aug, Sep, Oct, Nov, Dec. Rows: Local—TPCAR, WR, NAR, Application Fee, Total

*Dues are prorated from the month your license became active in your office—Please include a copy of your license and/or DOL License application. **Annual Bills are emailed to member, if email comes back as undeliverable, bill will be sent to Broker at office on record.

"I hereby apply for REALTOR® membership in the Tacoma-Pierce County Association of REALTORS®, enclosing my payment, which is to be returned to me in the event of non-election. Dues are not refundable when a member leaves the business, area or member office. In the event of my election, I agree on a condition to membership to complete the New Member Orientation, of the above named Association within 120 days of my join date. I agree to abide by the Code of Ethics of the National Association of REALTORS®, including the obligation to arbitrate any existing or future disputes with another member in accordance with the Association's arbitration procedures. I also agree to abide by the constitution, bylaws, rules and regulations of the local association, the state association and the national association. I consent that the association, through its membership committee or otherwise, may invite and receive information and documentation about me from any member or other person and I further agree that any information and comment furnished to the association by any person in response to the invitation shall be conclusively deemed to be privileged and not form the basis of any action by me for slander, libel or defamation of character. I understand that failure to abide by the above conditions of membership may result in suspension or termination of my membership in the Tacoma-Pierce County Association of REALTORS®.

Application must include payment and copy of the sales agent license to be processed.

Signature _____ Date _____

Pay by Cash, Check or Charge: **Visa MC Disc _____ EXP: _____ Total: _____

Signature _____

NOTICE: All New members MUST complete the New Member Orientation within 120 days of joining. The Code of Ethics requirement, which is mandated by the National Association of REALTORS®, is fulfilled when you attend the New Member Orientation.