

FOR OFFICE USE ONLY

NRDS# _____

ORIENTATION _____

APPLICATION FOR **SECONDARY** MEMBERSHIP

STEPHENVILLE ASSOCIATION OF REALTORS®

465 S. Graham St. Stephenville, TX 76401

254.965.4002

email address: saorboard@gmail.com

NAME OF OFFICE AND BROKER: _____

NAME AS SHOWN ON LICENSE: _____

LICENSE #: _____

TYPE OF SALESMAN: Salesman _____ Broker _____

DATE OF BIRTH: _____

HOME ADDRESS: _____

TELEPHONE: Home _____ Cell _____

EMAIL: _____

BUSINESS ADDRESS: _____

BUSINESS TELEPHONE: _____ **FAX:** _____

PLEASE INCLUDE A COPY OF YOUR DRIVERS LICENSE WITH THIS APPLICATION.

I hereby apply for secondary membership in the above Stephenville Association of Realtors® and will enclose my check in the amount of \$ _____, which I understand will be returned to me in the event I am not accepted to secondary membership of the Stephenville Association of Realtors®.

NOTE: Applicant acknowledges that the board will maintain a membership file of information which may be shared with other boards/associations where applicant subsequently seeks membership. This file shall include: previous applications for membership, all final findings of Code of Ethics violations and violations of other membership duties within the past three (3) years, pending complaints alleging violations of Code of Ethics or alleging violations of other membership duties, incomplete or pending disciplinary measures, pending arbitration requests, and information related to unpaid arbitration awards or unpaid financial obligations to the Board of MLS.

The fee for Secondary Membership will be \$200 for Brokers and \$100 for each Agent under that Broker, to be paid when joining the SAOR.

APPLICATION FEE: \$ 50.00

MEMBERSHIP FEE: \$200.00 (Broker) \$100.00 (Agent)

MLS DUES: \$

TOTAL DUE: \$250.00