



APPLICATION FOR REALTOR® MEMBERSHIP

Hattiesburg Area Association of REALTORS®, Inc.

1000 Broadway Dr., Suite 30

Hattiesburg, MS 39401

Phone: 601-582-0099 FAX: 601-582-0089

YOUR PREFERRED E-MAIL ADDRESS: _____

I, _____, hereby apply for REALTOR® membership in the above named Association and am enclosing my check in the amount of \$_____ for a one time application fee and for my annual dues* and assessments payable to the Hattiesburg Area Association of REALTORS®. My application fee and dues and assessments will be returned to me in the event of non-election. In the event of my election, I agree to abide by the Code of Ethics of the National Association of REALTORS®, and the Constitution, Bylaws and Rules and Regulations of the Hattiesburg Area Association of REALTORS®, Inc., the Mississippi Association of REALTORS® and the National Association of REALTORS®, and if required, I further agree to satisfactorily complete a reasonable and non-discriminatory written examination on such Code, Constitutions, Bylaws and Rules and Regulations. I consent that the Association, through its Membership Committee or otherwise, may invite and receive information and comment 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 membership brings certain privileges and obligations that require compliance. Membership is provisional and may be revoked should completion of requirements, such as the orientation, not be completed within times indicated in the Bylaws.

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 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 applicant was a REALTOR®.

* Dues amount is prorated according to month joining. I hereby submit the following information for your consideration:

APPLICATION FOR REALTOR® MEMBERSHIP: PAGE 3 FOR DESIGNATED BROKER/BRANCH MANAGER

Does your office comply with zoning requirements for its location? _____

Company Information: __ Individual __ DBA __ Partnership __ Corporation
Your Position: __ Principal __ Partner __ Corporate Officer __ Trustee
 __ Employee __ Independent Contractor __ Other

Names of Principals/Partners/ Officers/Trustees of your firm: _____

Have you ever been refused membership in any other real estate Association? _____ Yes _____ No
If yes, state the basis for each such refusal and detail the circumstances related thereto: _____

Is the Office Address, as stated, your principal place of business? _____
If not, or if you have any branch offices, please indicate and give address: _____

In what areas of real estate do you specialize? _____

Do you hold, or have you ever held a real estate license in any other state? _____
If so, where? _____

Have there been any complaints, within the last five years, against you or the firm with which you are associated? _____
If so, please specify: _____

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 fees and dues as from time to time established. **NOTE:** Payments to the Hattiesburg Area Association of REALTORS® are not deductible as charitable contributions. Such payments may, however, be deductible as an ordinary and necessary business expense. **NO REFUNDS.**

Dated _____

Signature _____

AGENT DATA WORKSHEET

SOCIAL SECURITY # _____

PIN CODE FOR MLS KEYPAD _____

NAME (Last, First, Middle Initial) _____

HOME ADDRESS _____

CITY _____ STATE _____ ZIP _____

HOME PHONE _____ OFFICE PHONE _____

OFFICE NAME _____

OFFICE ADDRESS _____

DATE YOU WERE LICENSED WITH THIS OFFICE _____

*REAL ESTATE OR APPRAISER LICENSE # _____

DATE LICENSE ISSUED _____

*PRE-LICENSE COURSES TAKEN: _____

DATE OF COMPLETION: _____

CELL # _____ PAGER # _____

EMAIL ADDRESS _____

PREFERRED MAILING ADDRESS (If different from office):

**Please provide a copy of the MRI Pre-License Certificate of Completion and a copy of MREC License.*



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1000 Broadway Drive, Suite 30
Hattiesburg, Mississippi 39401
601/582-0099
Fax 601/582-0089

INTERNET ACCESS AUTHORIZATION FORM

Office Name _____
Office Phone _____ Cell Phone _____
Address _____

User Full Name _____
Logon Name hat. _____
User e-mail address _____

ACCESS LEVEL (please check one)

_____ APPRAISER
_____ REALTOR
_____ STAFF

User signature _____
Date _____





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I, _____ understand that as a condition of membership in the Hattiesburg Area Association of REALTORS®, Inc. and in accordance with the Bylaws agree to complete the Indoctrination Course for new members within one (1) year of association's receipt of application.

I also agree to take the "New Member Code of Ethics Orientation Course" within 365 days from the date of application as required by the NATIONAL ASSOCIATION OF REALTORS®. However, this requirement does not apply to applicants for REALTOR® membership who have taken the pre-license courses in the classroom from the Miss. REALTOR® Institute since January 2001, or provisional members who have completed comparable orientation in another association, provided that REALTOR® membership has been continuous, or that any break in membership is for one year or less. If MRI pre-license courses were taken online, then the new member will be required to take the course at NAR's website.

In the event I am not able to complete this course(s) in the time specified, I understand that my membership will be suspended until I can complete the course(s). If I am suspended, I cannot use the term REALTOR® on any advertising, letterhead or business cards, etc.

Signature of Applicant

Date

Date of Approval by Board of Directors: _____

Date Indoctrination Course Taken: _____

