



Mid-Iowa Regional Board of REALTORS®  
Application for Active Membership

*Please complete and return this form with payment to  
Mid-Iowa Regional Board of REALTORS®  
205 Rainbow Drive  
Marshalltown, IA 50158*

I, \_\_\_\_\_,  
hereby apply for Realtor® Membership in the Mid-Iowa Regional Board of REALTORS®, and enclose my check in the amount of \$\_\_\_\_\_ which I understand will be returned to me in the event I am not accepted to membership. In the event my application is approved, I agree as a condition to membership to complete the orientation class of the Board and to thoroughly familiarize myself with the Code of Ethics of the National Association of REALTORS®, including the duty to arbitrate business disputes in accordance with the Code of Ethics and Arbitration Manual of the Board, the Constitutions, Bylaws, and Rules and Regulations of the Board, the Iowa Association of REALTORS® and the National Association of REALTORS®, and I further agree that my act of paying dues shall evidence my initial and continuing commitment to abide by the aforementioned Code of Ethics, Constitutions, Bylaws, Rules and Regulations, and duty to arbitrate, all as from time to time amended. Finally, I consent and authorize the Board, through its Membership Committee or otherwise, to invite and receive information and comment about me from any Member or other person, and I agree that any information and comment furnished to the Board by any Member or other person in response to any such 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.

Applicant acknowledges that if accepted as a Member and he/she subsequently resigns or is expelled from membership in the Board 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 proceeding and will abide by the decision of the Hearing Panel; or if applicant resigns or is expelled from membership without having complied with an award in 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.

Dues payable to the Mid-Iowa Regional Board of REALTORS® are not tax deductible as charitable contributions. Portions of such payments may be tax deductible as ordinary and necessary business expenses.

## 2019 Prorated Dues and Fees Schedule

<u>Month</u>	<u>National Dues</u>	<u>National PR Assessment</u>	<u>State Application Fee</u>	<u>State Dues</u>	<u>State Special Assessment</u>	<u>Local Application Fee</u>	<u>Local Dues</u>	<u>TOTAL</u>
JAN	150.00	35.00	100.00	145.00	10.00	200.00	395.00	<b>\$1,035.00</b>
FEB	137.50	35.00	100.00	145.00	10.00	200.00	395.00	<b>\$1,022.50</b>
MAR	125.00	35.00	100.00	145.00	10.00	200.00	395.00	<b>\$1,010.00</b>
APR	112.50	35.00	100.00	108.75	10.00	200.00	395.00	<b>\$961.25</b>
MAY	100.00	35.00	100.00	108.75	10.00	200.00	395.00	<b>\$948.75</b>
JUN	87.50	35.00	100.00	108.75	10.00	200.00	395.00	<b>\$936.25</b>
JUL	75.00	35.00	100.00	72.50	10.00	200.00	197.50	<b>\$690.00</b>
AUG	62.50	35.00	100.00	72.50	10.00	200.00	197.50	<b>\$677.50</b>
SEP	50.00	35.00	100.00	72.50	10.00	200.00	197.50	<b>\$665.00</b>
OCT	37.50	35.00	100.00	36.25	10.00	200.00	197.50	<b>\$616.25</b>
NOV	25.00	35.00	100.00	36.25	10.00	200.00	197.50	<b>\$603.75</b>
DEC	12.50	35.00	100.00	36.25	10.00	200.00	197.50	<b>\$591.25</b>

*I hereby submit the following information for your consideration:*

Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ (please attach a copy of your photo ID ie: Driver's License)  
Mo      Day      Year

Name: \_\_\_\_\_

Name as you want it to appear on roster: \_\_\_\_\_

Home Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Email Address: \_\_\_\_\_

Cell Phone: (\_\_\_\_\_) \_\_\_\_\_

Secondary Phone: (\_\_\_\_\_) \_\_\_\_\_

Real Estate License #: \_\_\_\_\_ (attach copy of license)

Office Name: \_\_\_\_\_

Office Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Office Phone: (\_\_\_\_\_) \_\_\_\_\_ Office Fax: (\_\_\_\_\_) \_\_\_\_\_

Do you hold or have you ever held a real estate license or appraisal license in any other state? Yes\_\_\_\_\_ No\_\_\_\_\_ If yes, where: \_\_\_\_\_

Has your real estate or appraisal license, in this or any other state, been suspended or revoked? Yes\_\_\_\_\_ No\_\_\_\_\_ If yes, detail the circumstances related thereto: \_\_\_\_\_

Are you presently, or have you previously been, a member of any Association of REALTORS®? Yes\_\_\_\_\_ No\_\_\_\_\_ If yes, state the association name and dates of membership: \_\_\_\_\_

If yes, state your NRDS ID Number: \_\_\_\_\_

Have you been refused or had your membership terminated in any other Association of REALTORS®? Yes\_\_\_\_\_ No\_\_\_\_\_ If yes, state the basis for refusal and detail the circumstances related thereto: \_\_\_\_\_

Have you been found in violation of the Code of Ethics or MLS Rules & Regulations in any Association of REALTORS® in the past three (3) years or are there any such complaints pending? Yes\_\_\_\_\_ No\_\_\_\_\_ If yes, provide details: \_\_\_\_\_

Are you currently being investigated by the Iowa Real Estate Commission (or any other states) for any complaints? Yes\_\_\_\_\_ No\_\_\_\_\_ If yes, provide details: \_\_\_\_\_

Have you been found in violation of any state's real estate licensing regulations within the past three (3) years? Yes\_\_\_\_\_ No\_\_\_\_\_ If yes, provide details: \_\_\_\_\_

Language(s) spoken: \_\_\_\_\_

Primary field of business: \_\_\_\_\_

Secondary field of business: \_\_\_\_\_

Secondary field of business: \_\_\_\_\_

(Field of Business is required to be completed. Please see last sheet for list of choices)

I agree that, if accepted for Membership in the Board, I shall pay the fees and dues as from time to time established.

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, may be grounds for revocation of my membership if granted.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I hereby certify that the named applicant for membership will be associated with my office. I have read and approved the foregoing application and understand that I am personally responsible for the professional conduct of the applicant.

Broker Signature: \_\_\_\_\_ Date: \_\_\_\_\_



**PLEASE ATTACH COPY OF:**

PHOTO ID

REAL ESTATE LICENSE

Primary and Secondary field of business/specialty

RESIDENTIAL

- 100 General Residential Sales
- 101 Existing Homes (Resale)
- 102 New Homes
- 105 Residential Lots
- 109 Residential Appraisal
- 113 Farm and Ranch

PROPERTY MANAGERMENTS

- 130 Single Family
- 131 Multi-Family
- 132 Condos; Resorts; Time Shares

COMMERCIAL

- 200 General Commercial Sales/Leasing
- 202 Office Sales/Leasing
- 203 Retail Sales/Leasing
- 204 Land Sales/Leasing
- 207 Commercial Appraisal

OTHER REAL ESTATE SPECIALTIES

- 300 Auctioneer
- 303 Young Professionals Network

OTHER

- 900 Please specify