

Application for REALTOR® Membership

La Crosse Area REALTORS® Association 111 6th Street South, La Crosse, WI 54601 Phone: 608-785-7744 | Email: membershipservices@larawebsite.com

Section A – Personal Information

I hereby apply for Membership in the La Crosse Area REALTORS® Association. and am enclosing all applicable fees and dues. In the event of my election, I agree to abide by the Code of Ethics of the National Association of REALTORS®, which includes the duty to arbitrate, and the Constitution, Bylaws and Rules and Regulations of the LARA, the Wisconsin REALTORS® Association (WRA) and the National Association of REALTORS® (NAR). I understand membership brings certain privileges and obligations that require compliance. Membership is final only upon approval by the Board of Directors and may be revoked should completion of requirements, such as Orientation, and New Member Code of Ethics training not be completed within the timeframe established in the LARA Bylaws. I understand that I will be required to complete periodic Code of Ethics training as specified in the LARA Bylaws as a continued condition of Membership.

Today's Date	/	_/ Date Started in Real Estate/		
Name				
First	Mide	dle	Last	Jr., Sr., etc.
Preferred Name _	(will appear as your first na	me on all displays, publication	ns, directories, and we	bsites for the association and MLS)
Driver's License 1	No. & State			
Home Address				
City/State/Zip				
Preferred E-Mail				
Preferred phone to	be used \square Cell \square C	Office		
Please send my St	tate and National Assoc	iation mail to □ Hom	e □ Office	

Section B – Office Information

Name of Firm		
Office Address		
City/State/Zip	Office Phone	
Position with Firm □ Broker/Ow	ner □ Sales Associate □ Office Mar	nager Appraiser Other
Primary involvement □ Resident	ial □ Commercial □ Resort □ Intern	national Other
WI License #	☐ Broker ☐ Sales ☐ Appraiser	Date of License//
MN License #	☐ Broker ☐ Sales ☐ Appraiser	Date of License//
IA License #	☐ Broker ☐ Sales ☐ Appraiser	Date of License//
Other #	☐ Broker ☐ Sales ☐ Appraiser	Date of License//
•	nother board or association which is a embership in another board or associ	affiliated with the National Association of ation within the past 3 years?
□ Yes □ No		
Primary/previous Association/Board membership(s)		Dates
Primary/previous Association/Bo	Dates	
Primary/previous Association/Board membership(s)		Dates
If you are now or have been a RE	ALTOR® indicate your NAR (NRD	S) #
and the last year of completion of	f NAR's Code of Ethics training requ	irement.

Attach a separate sheet listing any: (a) judgements, sanctions or other adjudications against you relating to violation of civil rights, real estate licensing or other laws or rules relating to unprofessional conduct; (b) actions by any Association of REALTORS® finding you in violation of the NAR Code of Ethics; and (c) any current or past personal bankruptcy or any real estate firm which you are/were a principal or officer; this information shall cover the period for the three years preceding this application.

Section C – Designated REALTORS® ONLY (Broker/Owner)

- 1. Please state the name of each principal, partner, corporate officer, or trustee of your firm. Attach separate sheet.
- 2. Please provide three business references in the space below:

NAME	ADDRESS	PHONE
1.		
2.		
3.		

All Applicants Read & Sign Below

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 LARA, I shall pay the fees and dues as from time to time established. NOTE: Payments to LARA are not deductible as charitable contributions. Such payments may, however, be deductible as an ordinary and necessary business expense.

By signing below, I consent that the REALTORS® Associations (local, state, national) and their subsidiaries, if any (e.g. MLS, Foundation) may contact me at the specified address, telephone numbers, fax numbers, email address or other means of communication available. This consent applies to changes in contact information that may be provided by me to the Association(s) in the future. This consent recognizes that certain state and federal laws may place limits on communications that I am waiving to receive all communications as part of my Membership.

Signature	Date	//
Dues are non-refundable, please initial		

Orientation Policy Acknowledgement - All REALTOR® Applicants Read & Sign Below

Orientation	Pol	licy:
-------------	-----	-------

All persons making application to the La Crosse Area REALTORS® Association must attend one of the first two scheduled orientations after application is made. Failure to attend one of the first two scheduled Orientations will result in a fine of \$100.00. In additional fine of \$100.00 will be paid for each missed Orientation thereafter. An application may appeal to the Directors of the La Crosse Area REALTORS® Association. Directors may grant an exception only under extreme circumstance. (Rev. 3/2006)

In addition to the above policy, all new applicants are required	d to complete the online New Member Code of
Ethics training as mandated by the National Association of RI	EALTORS®.

Signature	ī	Date	/	, ,	,
Digilatuit	1	Jun	,	,	
O					