

APPLICATION FOR REALTOR® OFFICE MEMBERSHIP

To the Centre County Association of REALTORS®, I hereby apply for REALTOR® Office Membership in the above named Association and am enclosing my check payable to Centre County Association of REALTORS® (CCAR) in the amount of:

One-Time Application \$2,000.00 MI	: Fee: L S Office** (<u>\$400.00</u> – Eac l	h Branch Office)	Annual Office Fee: \$1,250.00* MLS Office** fees
	n-MLS Office		\$450.00* non-MLS Office fees
*Amount shown is pro	orated according to month join	ning. **MLS Office - see	e page 4 regarding lock boxes
the Code of Ethics of Bylaws and Rules and required, I further agr Constitutions, Bylaws compliance. Member requirements, such as of	the National Association of Regulations of the above na- ree to satisfactorily complete and Rules and Regulations. I ship is final only upon appro- prientation, not be completed	REALTORS®, which incomed Association, the State a reasonable and non-diameterstand membership be a reasonable and formal within timeframe establishments.	on. In the event of my election, I agree to abide by cludes the duty to arbitrate, and the Constitution, e Association and the National Association, and if iscriminatory written examination on such Code, orings certain privileges and obligations that require ectors and may be revoked should completion of shed in the association's bylaws. She subsequently resigns from the Association or
otherwise causes mem membership upon app decision of the hearir	nbership to terminate with ar plicant's certification that he ng panel. If applicant resig	n ethics complaint pending e/she will submit to the p gns or otherwise causes	g, the Board of Directors may condition renewal of pending ethics proceeding and will abide by the membership to terminate, the duty to submit to d, provided the dispute arose while applicant was
I hereby submit the fol	llowing information for your	consideration:	
\square Mr., \square Mrs., \square M	Is., \square Miss, \square Dr., \square Othe	er:	
Name:			
	tate broker's or salesperson's license d has a place of business within the		propriate Pennsylvania regulatory agency to engage in the
Real Estate License #:			
Office Name:			
Residence Address:			
Phone:	Fax:	E-Mail:	
Cell Phone:	Preferred Ma	ailing:	ce Preferred Phone: Home Office
Are you presently a me	ember of any other Association	on of REALTORS®?	Yes No
If yes, name of Associa	ation and type of membership	p held:	
Have you previously h	eld membership in any other	· Association of REALTOI	RS®? □ Yes □ No
	•		KOS 105 - 110
Have you been found i	in violation of the Code of Et	thics or other membership	duties in any Association of REALTORS® in the o (If yes, provide details as an attachment.)
	ever been a REALTOR®, in ion of NAR's Code of Ethics		rship (NRDS) #: and last

Are you a principal, partner, corporate officer or branch office manager? Yes No If yes, you must also complete the next section of this application.
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 Board, I shall pay the fees and dues as from time to time established NOTE: Payments to the Centre County Association of REALTORS® are not deductible as charitable contributions. Such payments may, however, be deductible as an ordinary and necessary business expense. No refunds.
By signing below I consent that the REALTOR® 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 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.
Dated:Signature:
(Optional Information): Date of Birth: Specialty: Residential Commercial Resort International Other:
How long with current real estate firm? Previous real estate firm (if applicable):
Number of years engaged in the real estate business:
APPLICATION FOR REALTOR® MEMBERSHIP: FOR DESIGNATED BROKERS/BRANCH MANAGERS
Company information:
☐ Sole Proprietor ☐ Partnership ☐ Corporation ☐ LLC(Limited Liability Company)
Your position: Principal Partner Corporate Officer Branch Office Manager
Names of other Partners/Officers/ of your firm:
Have you ever been refused membership in any other Association of REALTORS®? ☐ 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? Yes No If not, or if you have any branch offices, please indicate and give address:

Do you hold, or have you ever held, a real estate license in any other state? Yes No If so, where:		
Have you or your firm been found in violation details:	of state real estate licensing regulations within the last three years? If yes, provide	
Have you or you firm been convicted, adjudg jurisdiction of a felony or other crime. If yes,	ed, or otherwise recorded as guilty by a final judgment of any court of competent provide details:	
and accurate information as requested, or any I I further agree that, if accepted for members! NOTE: Payments to the Centre County Ass	n furnished by me is true and correct, and I agree that failure to provide complete misstatement of fact, shall be grounds for revocation of my membership if granted. hip in the Board, I shall pay the fees and dues as from time to time established sociation of REALTORS® are not deductible as charitable contributions. Such ordinary and necessary business expense. No refunds.	
Foundation) may contact me at the specifie communication available. This consent applie	DR® Associations (local, state, national) and their subsidiaries, if any (e.g., MLS, ed address, telephone numbers, fax numbers, email address or other means of the sto changes in contact information that may be provided by me to the Association that state and federal laws may place limits on communications that I am waiving membership.	
Dated: S	Signature:	

2017 Office Dues and Fees

(Effective January 1, 2017 – December 31, 2017)

Centre County Association of REALTORS®, Inc. 2040 Sandy Drive, Ste. D, State College, PA 16803 Phone: 814 238 7622 | http://ccarinc.realtor

Application Fees Paid only at time of Application

Non-MLS Office Application Fee \$1000

MLS Office Application Fee \$2,000 (\$400 / Each Branch Offices)

	Non-MLS Office Application Fee	Non- MLS Office Dues	Total Dues & Fees
Jan.	1000.00	450.00	1450.00
Feb.	1000.00	412.50	1412.50
Mar.	1000.00	375.00	1375.00
April	1000.00	337.50	1337.50
May	1000.00	300.00	1300.00
June	1000.00	262.50	1262.50
July	1000.00	225.00	1225.00
Aug.	1000.00	187.50	1187.50
Sept.	1000.00	150.00	1150.00
Oct.	1000.00	112.50	1112.50
Nov.	1000.00	75.00	1075.00
Dec.	1000.00	37.50	1037.50

	MLS Office Application Fee	MLS Office Dues	Total Dues & Fees
Jan.	2000.00	1250.00	3250.00
Feb.	2000.00	1145.83	3145.83
Mar.	2000.00	1041.67	3041.67
April	2000.00	937.50	2937.50
May	2000.00	833.33	2833.33
June	2000.00	729.17	2729.17
July	2000.00	625.00	2625.00
Aug.	2000.00	520.83	2520.83
Sept.	2000.00	416.67	2416.67
Oct.	2000.00	312.50	2312.50
Nov.	2000.00	208.33	2208.33
Dec.	2000.00	104.17	2104.17

	MLS Individual Application Fee	MLS Individual Dues	MLS Individual Total Dues & Fees
Jan.	150.00	235.00	385.00
Feb.	150.00	215.42	365.42
Mar.	150.00	195.83	345.83
April	150.00	176.25	326.25
May	150.00	156.67	306.67
June	150.00	137.08	287.08
July	150.00	117.50	267.50
Aug.	150.00	97.92	247.92
Sept.	150.00	78.33	228.33
Oct.	150.00	58.75	208.75
Nov.	150.00	39.17	189.17
Dec.	150.00	19.58	169.58

Rev. 10/21/2016

**NOTE TO MLS PARTICIPANT OFFICE APPLICANT - Lock Boxes:

It is required that Participant Offices utilize the current lock box system. New and existing Participant Offices will be required to lease from the Association (CCAR) or acquire, at their own expense, compatible system ready lock boxes. Further, any lockboxes purchased outside of the association lease may not be included in any future one-for-one Association (CCAR) contract upgrade/exchange. Revised 02/15/17

INTERNET DATA EXCHANGE AGREEMENT CENTRE COUNTY ASSOCIATION OF REALTORS® MULTIPLE LISTING SERVICE

This form permits you to opt in or out of the Internet Data Exchange Program. If you opt in, you are considered an Internet Data Exchange Subscriber (IDXS). Becoming an IDXS does not require you to do anything else. The purpose of this agreement is for you to allow or not allow other Brokers to advertise your listings on their own company display.

This form must be filled out completely and signed by the Broker of each office holding participatory rights in the CCAR Multiple Listing Service.

Firm Name:	
Broker of Record:	
E- Mail Address:	
Firm Street Address:	
Check one of these two boxes. By s information indicated next to the box	o doing, you are agreeing that you understand the x checked.
hereby giving every other Integrates permission to advertise my li	ata Exchange Subscriber. I understand that I am ternet Data Exchange Subscriber in the CCAR MLS stings on their participant display, subject to the Centre County Association of REALTORS®.
means that other Internet Dat	th Data Exchange Subscriber. I understand that this ta Exchange Subscribers will not be permitted to participant display and I will not be permitted to gs on my display.
Broker Signature	Date