



WHITE MOUNTAIN  
ASSOCIATION OF REALTORS®

5658 Highway 260, Suite D  
Wagon Wheel Professional Plaza  
928-537-1107 phone | 928-537-3788 fax  
[wmar@wmaronline.com](mailto:wmar@wmaronline.com) email  
[www.wmaronline.com](http://www.wmaronline.com) website

## **REALTOR® MEMBERSHIP APPLICATION CHECKLIST**

To ensure processing of your WMAR Membership Application to be completed as quickly as possible, please make sure all applicable lines are completed:

- All signature and initial lines are filled in and dated, where applicable, on all pages of the application
- Your User ID must be 6-9 characters in length and must be Alpha-Numeric. No symbols or punctuation marks.
- Your email address is complete, correct and legible
- Your Broker has signed and dated the application where indicated.
- If a branch manager is signing on behalf of the Broker, a letter authorizing the signing on behalf of the Broker must be included.
- If you answered YES to any of the 5 questions on page three \*\*, a letter of explanation must be included.
- A copy of your current Arizona Real Estate License** (you may print one off at <http://www.azre.gov/>)
- A copy of your valid photo id**
- If the White Mountain Association of REALTORS® will not be your PRIMARY board, please include a ***“Letter of Good Standing”*** from your Primary Association
- A copy of a current Code of Ethics Certificate, to have been completed within the last 2 years, if you are newly licensed, you may submit a copy of a current Code of Ethics Certificate, after your membership has been process but before you attend New Member Orientation.**
- You are required to complete a New Member Orientation class within 60 days of submitting your New Member Application.** WMAR will register you for the first available date following the processing of your New Member Application. If you are unable to attend this date, please contact the WMAR Board Office within 5 business days to reschedule a New Member Orientation for the next available date:

1<sup>st</sup> available New Member Orientation Date: \_\_\_\_\_

Next available New Member Orientation Date: \_\_\_\_\_

Your membership application will be processed within **48 business hours** upon receipt of a **COMPLETE** application packet.



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**REALTOR® & OFFICE MEMBER APPLICATION**

PLEASE PRINT/COMPLETE ALL FIELDS, IF NOT APPLICABLE, PLEASE USE N/A

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

Last

First

MI

(Nickname)

Physical Address: \_\_\_\_\_

Street

City

State

Zip

Mailing Address: \_\_\_\_\_

Street

City

State

Zip

Home Phone

Cell Phone

Email Address

Website Address

wmar. \_\_\_\_\_

Birthday: \_\_\_\_\_

REQUESTED FLEX MLS USER ID

mm/dd/yy

Have you previously held a WMAR Membership?  Yes  No

Office Affiliation: \_\_\_\_\_

Company Name

Office Phone #

Fax

Physical Address: \_\_\_\_\_

Street

City

State

Zip

Real Estate License # \_\_\_\_\_

Type of License:  Broker  Salesperson

Office Real Estate License # \_\_\_\_\_

I am applying for:

Association Membership Only

Individual NRDS # \_\_\_\_\_

Office NRDS # \_\_\_\_\_

Association Membership & MLS Participation

MLS Participation

PRIMARY Field of Business: \_\_\_\_\_

PRIMARY Board: \_\_\_\_\_

Acronym

Has this office OR REALTOR® previously held a WMAR Membership?  Yes  No

Position with company:  Owner  Designated Broker/Owner  Designated Broker  Sales Agent  Office Manager

Please check any designations that you hold:  ALC  CPM  ARM  CCIM  CIPS  CRB  CRE  CRS

GAA  GRI  LTG  RAA  SIOR  OTHER \_\_\_\_\_

Email address for online billing: \_\_\_\_\_

I affirm that I will (or will be) actively endeavoring to list real property and accept (or will accept) offers of cooperation and Compensation from other Participants in the MLS?  Yes  No **Applicant's Initials** \_\_\_\_\_

**\*\*This section must be completed by all applicants. If the answer is yes to any of the following questions, please provide an appropriate explanation on a separate sheet of paper and attach it to this application:**

1. Do you hold, or have you ever held, a real estate license in any other state?  Yes  No
2. Has your real estate license in this or any other state ever been suspended or revoked?  Yes  No
3. Has your membership in another real estate Association ever been suspended or revoked?  Yes  No
4. Are there now, any pending or unresolved complaints, or have there been within the past 3 years against you with any real estate Association or any state/federal regulatory agency?  Yes  No
5. Have you ever been convicted of a felony?  Yes  No

**Please read the following:**

With this application, I hereby apply for membership in the White Mountain Association of REALTORS®. In the event my application is not accepted, I understand I will be refunded any monies paid,

**As further condition of membership, I agree to complete the WMAR New Member Orientation class within 60 days of my application date. Failure to attend will result in the termination of my membership and forfeiture of all dues and fees paid. Applicant's Initials:** \_\_\_\_\_

I further agree to 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 this Association and the *Bylaws, Policy Statements* and *MLS Rules & Regulations* of the White Mountain Association of REALTORS®, the Arizona Association of REALTORS®, and the National Association of REALTORS®

I further agree that my act of paying dues shall evidence my initial and continuing commitment to abide by the aforementioned *Code of Ethics, Bylaws, Policy Statements, MLS Rules & Regulations*, and duty to arbitrate; all as from time-to-time may be amended. Finally, I consent and authorize the White Mountain Association of REALTORS® to invite and receive information and comment about me from any Member, or other person or Association. I further agree that any information furnished to the Association in response to any such invitation shall be conclusively deemed to be privileged and will not form the basis of any action by me for slander, libel or defamation of character.

**NOTE:** Applicant acknowledges that if accepted as a Member and he/she subsequently resigns or is expelled from membership in the Association 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 been established previously as due and payable in relation thereto, provided that the award and such costs have not, in the interim, been otherwise satisfied.

**NOTE:** Dues payments to the White Mountain Association of REALTORS® are not tax deductible as charitable contributions. Portions of such payments may be tax deductible as ordinary and necessary business expenses. The White Mountain Association of REALTORS® does not prorate its annual dues. Per the Association Bylaws, once membership is accepted, all dues are non-refundable. All White Mountain Association of REALTORS® membership re-applications are subject to re-payment of dues and application fees.

**I certify the information supplied on this application is correct and that I have read and accept all the conditions of application described above. I also agree that if accepted for membership, I shall pay the dues and fees as from time-to-time established.**

**Applicant's Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Designated Broker's Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Broker's Name (printed):** \_\_\_\_\_

**CREDIT CARD INFORMATION**

**Date:** \_\_\_\_\_

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**NAME AS APPEARS ON CARD**

**AGENT ID/ NRDS #:** \_\_\_\_\_

**CIRCLE ONE:**

AMEX   VISA   AMERICAN EXPRESS

MASTERCARD   DISCOVER

**DATE PROCESSED:**

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**CREDIT CARD NUMBER**

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**EXPIRATION DATE & CVS Code**

**AMOUNT\$\$:** \_\_\_\_\_

**PAYMENT FOR:** \_\_\_\_\_

**WANTS RECEIPT?   YES   NO**

**E-MAIL ADDRESS** \_\_\_\_\_

**\*\* If paying by check, please attach check to application when submitting\*\***