



3320 Kay Road
Lakeside, AZ 85929
928-537-1107 phone | 928-537-3788 fax
wmar@wmaronline.com
www.wmaronline.com

APPRAISER 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 either 6-9 characters in length and must be Alpha-Numeric. **No symbols or punctuation marks**
- Your E-Mail address is complete, correct, and legible
- If you answered "Yes" to any of the five questions on page 2, please attach an explanation.
- Completed Credit Card Authorization form
- A copy of your valid photo id**
- A copy of your current Arizona Appraiser License**
- If the White Mountain Association of REALTORS® is to be your secondary association, please include a Letter of Good Standing from your Primary Association**

Your membership application will be processed within 2 business days, upon receipt of a **COMPLETE** application packet.



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APPRAISER MEMBERSHIP 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. _____

FLEX MLS USER ID

Birthday: _____

mm/dd/yr

Have you previously held a WMAR Membership? Yes No

Office Affiliation: _____

Company Name

Phone#

Fax

Physical Address: _____

Street

City

State

Zip

Appraiser License# _____

NRDS# _____

I am applying for:

Association Membership Only
\$166.00 WMAR Dues

Association Membership & MLS Participation
\$166.00 WMAR Dues + \$120.00 MLS Subscription

Has this office previously held a WMAR Membership? Yes No

Position with company: Owner Employee Office Manager

Email address for online billing: _____

****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, an appraiser license in any other state? Yes No
2. Has your appraiser 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.

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 privilege 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: _____

Applicant Office Principal Signature: _____

Date: _____

Office Principal Name (printed): _____

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

CREDIT CARD INFORMATION

Date: _____

NAME AS APPEARS ON CARD

NRDS #: _____

CIRCLE ONE:

AMEX VISA AMERICAN EXPRESS

MASTERCARD DISCOVER

DATE PROCESSED: _____

CREDIT CARD NUMBER

EXPIRATION DATE & CVS Code

AMOUNT\$\$: _____

WANTS RECEIPT? YES NO

E-MAIL ADDRESS _____

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