



APPLICATION FOR REALTOR® MEMBERSHIP

North Bay Association of REALTORS®

Questions in **red** must be completed to process the application.

Applicant information must be updated in the DRE prior to processing.

SECONDARY MEMBERSHIP APPLICATION

Secondary membership is only available if you **currently hold an active REALTOR® membership with another REALTOR association.**

I apply for the following category of membership:

- ☐ Secondary Designated REALTOR® - Broker (Principle, Partner, Corporate Office, or Branch Office Manager)
☐ Secondary REALTOR®

MEMBER INFORMATION

1. **Name (as it appears on your license):** _____
2. Nickname/Preferred Name: _____
3. **Name of Brokerage:** _____
4. (This is the broker/brokerage name under which you will be doing business and under which DRE has issued your license and/or approved your DBA)
5. **Brokerage Address:** _____
(street) (city) (state) (zip code)
6. **Home Address:** _____
(street) (city) (state) (zip code)
Which do you prefer as the mailing address: ☐ Brokerage ☐ Home
7. Brokerage Telephone (main): _____ Brokerage Telephone (direct): _____
8. Mobile Phone Number: _____
Which do you prefer as the primary phone number: ☐ Brokerage ☐ Mobile Phone
9. List all other DBAs: _____
10. Email Address: _____
11. **Date of Birth (MM / DD / YYYY):** ____/____/____
12. Website Address: _____

Your initial password for the North Bay Association website: Welcome (You will be able to change this later)

Please select your primary market area (you may select only one):

- | | | | |
|--|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Mendocino / Lake | <input type="checkbox"/> Napa County | <input type="checkbox"/> North County | <input type="checkbox"/> Petaluma |
| <input type="checkbox"/> Rohnert Park / Cotati | <input type="checkbox"/> Santa Rosa | <input type="checkbox"/> West County | <input type="checkbox"/> Sonoma Valley |
| <input type="checkbox"/> Windsor | <input type="checkbox"/> None | | |

Please select your **secondary** chapters (you may select as many as you wish):

- | | | | |
|--|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Mendocino / Lake | <input type="checkbox"/> Napa County | <input type="checkbox"/> North County | <input type="checkbox"/> Petaluma |
| <input type="checkbox"/> Rohnert Park / Cotati | <input type="checkbox"/> Santa Rosa | <input type="checkbox"/> West County | <input type="checkbox"/> Sonoma Valley |
| <input type="checkbox"/> Windsor | <input type="checkbox"/> None | | |

13. Please list your applicable license(s) corresponding with this application:

REAL ESTATE LICENSE:

Broker's License, DRE License #: _____ Expiration Date: _____

Salesperson's License, DRE License #: _____ Expiration Date: _____

14. List all Boards / Associations of REALTORS® to which you CURRENTLY BELONG:

15. My NRDS #: _____

16. Please contact your current primary association to provide your **Letter of Good Standing**. Letters can be sent via email to info@nba.realtor.

GENERAL INFORMATION

1. **License validity.** I understand that if my license is terminated, lapses or inactivated at any time, my secondary REALTOR® membership is subject to immediate termination.
2. **No refund.** I understand that my Association membership dues and fees are non-refundable. In the event I fail to maintain eligibility for membership or for any reason, I understand I will not be entitled to a refund of my dues or fees.

Applicant's initials _____

3. **Authorization to release and use information, waiver.** I authorize the Association or its representatives to verify any information provided by me in this application by any method including contacting the California Department of Real Estate, my current or past responsible broker or designated REALTOR®, or any Association or MLS where I held, or continue to hold, any type of membership. I further authorize any Association or MLS where I held, continue to hold, any type of membership to release all my membership or disciplinary records to this Association, including information regarding (i) all final findings of Code of Ethics violations or other membership duties within the past three (3) years; (ii) pending ethics complaints (or hearings); (iii) unsatisfied discipline pending; (iv) pending arbitration requests (or hearings); and (v) unpaid arbitration awards or unpaid financial obligations. I understand that any information gathered under this authorization may be used in evaluating my application for membership and future disciplinary sanctions. I waive any legal claim or cause of action against the Association, its agents, employees, or members including, but not limited to, slander, libel or defamation of character, that may arise from any action taken to verify, evaluate or process this application or other use of the information authorized and released hereunder.

4. By signing below, I expressly authorize the Association, including the local, state, and national, or their subsidiaries or representatives to e-mail, telephone, text or send by U.S. mail to me, at the e-mail, telephone and text number and addresses above, for any and all Association (including the local, state and national, or their subsidiaries or representatives) communications, including but not limited to those for political purposes and/or material advertising the availability of or quality of any property, goods or services offered, endorsed or promoted by the Association (including the local, state and national, or their subsidiaries or representatives).

SIGNATURES

I certify that I have read and agree to the terms and conditions of this application and that all information given in this application is true and correct.

Signature of Applicant

Date of Signature

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