



P.O. BOX 528, 9 COATES DR., SUITE 1, GOSHEN, NEW YORK 10924 • 845-294-7905 • FAX 845-294-3414 • WWW.OCAR.COM

Membership Application - Member Type: Designated REALTOR® (Broker/Owner) REALTOR® (Agent) Secondary (Please Check One)

I, \_\_\_\_\_ Mr. Mrs. Ms. Please print name as it appears on your license (First) (Middle Initial) (Last)

hereby apply for Realtor Membership in the Orange County Association of REALTORS®, and include my payment which I understand will be returned to me in the event I am not accepted to membership. In the event my application is approved, 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 Orange County Association of REALTORS®, the New York State Association of REALTORS®, and the National Association of REALTORS®. I consent that the Association, through it's membership committee or otherwise, may invite and receive information and comment about me from any member or other person, and I further agree that any information and comment furnished to the Association by any person in response to the invitation shall be conclusively deemed to be privileged and not form the basis of any action by me for slander, libel or defamation of character. I understand that I will be required to complete the periodic Code of Ethics training as specified in the association's bylaws as a continued condition of membership.

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 number, 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.

I acknowledge that my membership becomes effective upon completion of the required Orientation Course.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_ Orientation Date: \_\_\_\_\_

Are you currently, or have you ever been a REALTOR® member of another board? NO YES

If YES please enter Board Name: \_\_\_\_\_ State: \_\_\_\_\_

If you are a currently a REALTOR® member we MUST have documentation from that board which provides the following: 1. Letter of Membership in good standing. 2. Your member NRDS # 3. Your office NRDS # (National Realtor Database System)

I wish to designate OCAR as my primary board. I wish to join OCAR as a secondary board

I hereby submit the following information for your consideration

NYS Real Estate License Reg. #: \_\_\_\_\_ Exp. Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Copy of License MUST be submitted with Application

Home Mailing Address: \_\_\_\_\_ Preferred Mail: Home Office

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ - \_\_\_\_\_

Contact Phone: \_\_\_\_\_ Home Fax: \_\_\_\_\_ / \_\_\_\_ / \_\_\_\_ (NOT Office Phone Number) Preferred Phone: Personal Office Date of Birth

\*E Mail Address: \_\_\_\_\_ \*Most of our correspondences to our members are sent via email only. It is important that you provide us with a current and accurate business email address.

Company/Office Name: \_\_\_\_\_

Office/Branch Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ - \_\_\_\_\_

Office Phone: \_\_\_\_\_ Your Ext: \_\_\_\_\_ Office Fax: \_\_\_\_\_

Company/Office Web Page: \_\_\_\_\_



Proof of licensure & office association MUST accompany this application. (i.e. Copy of Real Estate license or Printout from eAccessNY)

Incomplete Applications can Not Be Processed.



**ARTICLE X: DUES, FEES, AND FINANCES - 2011**

**SECTION 3 DUES PAYABLE:** Dues for all members shall be payable annually in advance on the first day of January. Dues shall begin on the first day of the month in which a member shall be notified of election and shall be prorated for members monthly for the year\*

**SECTION 4 NON PAYMENT OF DUES:** If dues are not paid within one (1) month after the due date, there shall be a late charge of 10% of the dues amount. Two months after due date, membership will automatically be suspended. On March 15<sup>th</sup> of any given year, two and a half months after due date, membership shall automatically terminate, unless within that time, the amount due, including late charge, is paid. A former member who has had his membership terminated may apply for reinstatement in the manner prescribed for new applicants for membership, after making payment in full of all accounts due as of the date termination.

**NEW MEMBERS' DUES ARE AS FOLLOWS:**

**\*OCAR Membership includes Continuing Education!**

\*Classes held at Orange County Association of REALTORS® facilities. Visit [www.ocar.com](http://www.ocar.com) for complete schedule.

Join Month	Local Dues	+State Dues	+National Dues	= SubTotal	+ Initiation*
January	\$235.00	\$90.00	\$115.00	= \$440.00	+ \$100 or \$300*
February	\$215.40	\$82.50	\$108.33	= \$406.23	+ \$100 or \$300*
March	\$195.80	\$75.00	\$101.67	= \$372.47	+ \$100 or \$300*
April	\$176.20	\$67.50	\$95.00	= \$338.70	+ \$100 or \$300*
May	\$156.60	\$60.00	\$88.33	= \$304.93	+ \$100 or \$300*
June	\$137.00	\$52.50	\$81.67	= \$271.17	+ \$100 or \$300*
July	\$117.40	\$45.00	\$75.00	= \$237.40	+ \$100 or \$300*
August	\$97.80	\$37.50	\$68.33	= \$203.63	+ \$100 or \$300*
September	\$78.20	\$30.00	\$61.67	= \$169.87	+ \$100 or \$300*
October	\$58.60	\$22.50	\$55.00	= \$136.10	+ \$100 or \$300*
November	\$39.00	\$15.00	\$48.33	= \$102.33	+ \$100 or \$300*
December	\$19.40	\$7.50	\$41.67	= \$68.57	+ \$100 or \$300*

\*Initiation Fee: REALTOR® -\$100 Designated REALTOR® (Broker/Owner) - \$300

**INITIATION FEE waived if currently a REALTOR member transferring from another board.**

There shall be no reimbursements or partial payment of fees/charges for persons leaving the OCAR

**Membership Application Payment Information**

Initiation Fee: \$ \_\_\_\_\_ . \_\_\_\_\_ \$100 Realtor® / \$300 Designated Realtor®

Dues (Local+State+National): \$ \_\_\_\_\_ . \_\_\_\_\_ \* Prorated monthly. See chart above.   
**OCAR dues include continuing Education** \*Local Dues Only if joining as Secondary member.

**Total Payable OCAR:** = \$ \_\_\_\_\_ . \_\_\_\_\_ Effective Date: \_\_\_\_\_ / \_\_\_\_\_  
 (Correct Payment amount MUST be entered in order to process) Month Year

Paid Check #: \_\_\_\_\_ Cash AmX MC Visa

Card #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Applicant Name \_\_\_\_\_  
Please Print

Card Holder Name \_\_\_\_\_ Phone # \_\_\_\_\_  
Please Print

Card Holder Billing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Card holder Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Incomplete Applications can Not Be Processed.**



For Office Use Only Member Number: \_\_\_\_\_ ocar app 12/10

