



425 S. Volusia Ave
Orange City, FL 32763
Phone: 386-774-6433
Fax: 386-774-7422

MEMBERSHIP APPLICATION

Email: Sherry@westvolusiarealtor.org
Website: www.WestVolusiaRealtor.org

APPLICANT INFORMATION

Name as shown on your professional license: _____

Nickname (if any): _____

Name of Firm where you are licensed: _____

Address of Firm: _____

City/State/Zip: _____

Office Phone w/area code: _____ Office fax: _____

Office Web Site Address: _____

Office License #: _____ Office MLS #: _____

Firm is a Sole Proprietorship DBA Partnership Corporation

PERSONAL INFORMATION

DBPR License # _____ Expiration Date: _____

Type of License: Broker Broker/Salesperson Salesperson Appraiser

Are you multi-licensed? Yes No First licensed in Florida in (month/year): _____

Position: Principal or Partner Corporate Officer Trustee Employee Independent Contractor

Home Address: _____

City/State/Zip: _____ Home Phone: _____

Cell Phone: _____ Preferred Mailing Address: Home Office

Member email address: _____

Date First Licensed in real estate (month/year): _____

Date you joined the firm listed on this application (month/year): _____

Date of Birth: _____ Place of Birth: _____

Are you currently or have you been a member of any other REALTOR® association since June 1998? Yes No

If so, which association, type of membership and dates of membership: _____

What REALTOR® designations, if any, do you presently hold? _____

NRDS #: _____ FIRM # _____

DATE: _____ ORIENTATION DATE: _____

APPLICANT CERTIFICATION

ALL APPLICANTS MUST READ AND SIGN

I understand that the terms REALTOR® and REALTORS® are registered service marks, and the registration is owned by the NATIONAL ASSOCIATION OF REALTORS®, and only as a member of a member association am I allowed to use these terms.

I further understand and agree that I WILL NOT use these terms in identifying myself in any manner, until I have satisfactorily completed the required Orientation Course and have been fully oriented into the membership of the West Volusia Association of REALTORS®, Inc. as a REALTOR®.

In the event of my election, I agree to abide by the Code of Ethics of the National Association of REALTORS® and the Constitution, Bylaws, Rules and Regulations of the West Volusia Association of REALTORS®, the Florida Association of REALTORS® and the National Association of REALTORS®. I consent that the Association 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 agree to arbitrate when required by the Code of Ethics and to abide by the decision of the Professional Standards Committee of the Association, or the decision of the Appeals Board in the event of an appeal. Irrevocably waive all claims against the Association, or any of its officers, directors, members, or employees, for any act in connection with the business of the association, and particularly as to its or their acts in electing or failing to elect, advance, suspend, expel or otherwise discipline me as an applicant member. I acknowledge that if accepted as a member, and I subsequently resign from the Association or otherwise cause membership to terminate with an ethics complaint pending, that the Board of Directors may condition renewal of membership upon my certification that I will submit to the pending ethics proceeding and will abide by the decision of the hearing panel.

I understand that I must: a) complete an Orientation course; b) pay all required dues and fees at the time of application submission; and c) comply with any required legal liability training as required from time to time by the Board of Directors as a condition of maintaining my membership.

I understand that if I fail to attend Orientation within 60 days and/or fail to pay the required total fees and dues, this application may be automatically deemed abandoned by the Association. Should it be abandoned, or should I voluntarily withdraw my application prior to completing the requirements, I understand that the application fee and dues paid will be forfeited and that I must reapply should I seek membership in the future.

If a Principal Broker, I certify that I am in compliance with all applicable Florida Real Estate Regulations, that I have no record of official sanctions involving unprofessional conduct, and that I have (had) no pending or recent personal or corporate bankruptcy within the past three years.

I consent to hand give my express written permission for the National Association of REALTORS®, Florida Association of Realtors®, and the West Volusia Association of Realtors® to send me faxes at:

_____ (fax number).

Signature of applicant: _____ Date: _____

PAYMENT INFORMATION

CHECK # _____ CASH MASTERCARD VISA

ACCOUNT #: _____ EXPIRATION DATE: _____

CARD HOLDER NAME: _____ SIGNATURE: _____