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REAL ESTATE OFFICE MEMBERSHIP APPLICATION

SECTION I – OFFICE INFORMATION:

Corporate Name of Real Estate Office:	NRDS ID (to be assigned by TCRA Staff):

First Name

Name as you would like it printed on Membership Roster:	Designated Broker:

Branch Office Main Office

Address:	

Street Suite

Mailing Address: <input type="checkbox"/> Same as Above	

Street Suite

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City State Zip Code

Phone:		

Business Fax Cell

Website:	Email Address:

SECTION II:

State the names and titles of all other principals, partners or corporate officers of your firm (attach separate sheet if necessary)

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Name Title Email

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Name Title Email

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Name Title Email

Is this office address specified in Section I your principal place of business? Yes No

If "No", list the names and address of all branch office or other real estate firms in which you are principal partner or corporate officer:

Name	Address
Name	Address
Name	Address

Is your office currently a member of another board or association which is affiliated with the NATIONAL ASSOCIATION OF REALTORS® or has your office held membership in another board or association within the past three (3) years? Yes No

If "Yes", list each board and association where membership was held, type of membership held and approximate dates of membership.

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Are you or is any real estate firm in which you are a sole proprietor, general partner or corporate officer involved in any pending bankruptcy or insolvency proceeding or have you or any real estate firm in which you are a sole proprietor, general partner, or corporate officer been adjudged bankrupt in the past three (3) years? Yes No

If "Yes", specify the place(s) and date(s) of such action, and detail the circumstances relating thereto (attach a separate sheet if necessary):

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Has your real estate license, in this or any other state, been suspended or revoked? Yes No

If "Yes", specify the place(s) and date(s) of such action, and detail the circumstances relating thereto (attach a separate sheet if necessary):

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Are there now any pending or unresolved complaints, or have there been within the past three (3) years, any complaints against your firm before any state real estate regulatory agency or any other agency or government? Yes No

If "Yes", specify the substance of each complaint in each state, the agency before which complaint was made, and the current status or resolution of such complaint (attach a separate sheet if necessary):

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SECTION III – Terms and Conditions:

I, broker of said Office, hereby apply for REALTOR® membership for _____
(office name) in the Thurston County REALTORS® Association. With this application, I am submitting funds an Application Fee in the amount of \$100, which covers administrative costs. In the event of non-election to membership, I understand the Association will retain the application fee.

By admission to membership, I understand that all real estate agents in my office with active Washington State Real Estate Licenses must also apply for membership with the Olympia-Thurston County Association of REALTORS®, and maintain membership through payment of dues. I also understand that each new agent from my office is required to attend New Member Orientation within ninety (90) days of their application for membership.

Furthermore, I understand that when a new agent begins working for my firm, they are required to make application to the Olympia-Thurston County Association of REALTORS® and pay current dues and fees within 30 days of hanging their license in my office. I understand that if an agent in my office refuses to apply for membership, pay REALTOR® dues, and/or attend Orientation, this jeopardizes membership for my entire office, as we will be out of compliance with the Olympia-Thurston County Association of REALTORS® Bylaws.

I understand the Association will announce the application of said office to the general membership and will invite and receive information and comments about it from any Member in response to that invitation. Such information shall be conclusively deemed privileged and shall not form the basis of any action by me for slander, libel, or defamation of character.

Upon completion of the requirements of membership, I understand the Board of Directors will vote on the membership application for this office. If this office is elected to membership, I agree that those practicing real estate in my office will abide by the Constitution, Bylaws, Rules, and Regulations of the Thurston County REALTORS® Association, the Washington Association of REALTORS®, and the National Association of

REALTORS®, including the obligation to mediate and/or arbitrate controversies arising out of real estate transactions as specified by Article 14 of the Code of Ethics, and as further specified in the Code of Ethics and Arbitration Manual of the National Association of REALTORS®, as from time to time amended.

As a Transferred Member from another Local Association, I certify there are no outstanding ethics violation sanctions or arbitration awards against this office from any prior REALTOR® Association(s). _____ (Initial)

I give permission for the Thurston County REALTORS® Association to obtain a membership file from a previous Association, which may include findings of an ethics or arbitration hearing.
_____ (Initial)

I have received a copy of the Constitution, Bylaws, Rules and Regulations and Code of Ethics. _____
(Initial)

NOTE: Applicant acknowledges that the board/association will maintain a membership file of information which may be shared with other boards/associations where applicant subsequently seeks membership. This file shall include: previous applications for membership; all final findings of Code of Ethics violations and violations of other membership duties within the past three (3) years pending complaints alleging violations of the Code of Ethics or alleging violations of other membership duties; incomplete or pending disciplinary measures pending arbitration requests; and information related to unpaid arbitration awards or unpaid financial obligations to the association.

SECTION IV (All applicants must sign):

I hereby certify that the foregoing information furnished by me is true and correct, and I agree that failure to provide complete and accurate information as requested, or any misstatement of fact, may be grounds for revocation of my membership, if granted. I agree that, if accepted for membership in the board, I will pay the fees and dues as established.

Signature:

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Applicant

Date