



2400 Post Road, Warwick, RI 02886

Phone: (401) 274-8386 | Email: [info@ricabor.realtor](mailto:info@ricabor.realtor) | Web: [www.ricabor.realtor](http://www.ricabor.realtor)

## MEMBERSHIP APPLICATION

**Please refer to this checklists when applying for membership and return all items listed.**

### New Member:

**Application fees are \$200 for Principals & \$150 for Associates + Prorated Dues**

*If you are a new member and/or affiliate with an office that is a member, please include:*

- Completed and signed application.
- Dues payment (Prorated dues are available from your Manager or on [www.ricabor.realtor](http://www.ricabor.realtor).)
- Appraisal or Real Estate license (copy.)
- Letter of Good Standing from your Manager verifying your start date. Or, provide a copy of DBR's transfer of license form.

### Designated Realtor Member:

*If you are the designated principal of a real estate or appraisal office, please include the following:*

- Completed and signed application.
- Dues payment (Prorated dues available on [www.ricabor.realtor](http://www.ricabor.realtor).)
- Principal's Appraisal or Real Estate license (copy)
- [DR Certification Form](#)
- Letter of Good Standing from your previous Board.
- Class certificate on the National Association of REALTORS® Code of Ethics. Completion date **must comply with** the biennial of 1/1/19—12/31/21. (copy)
- To participate in the Statewide Multiple Listing Service, see [this page](#) of the MLS website and complete the Agreement to Participate contract. Please contact Donna McGinn at [donna@rirealtors.org](mailto:donna@rirealtors.org) to file the contract or if you have any questions on MLS billing or policy.

### Transfer Member:

*If you are a Sales or Broker Associate or Appraiser that is a current member of another board and would like to transfer to our board, please include:*

- Completed and signed application.
- Dues payment (Prorated dues available on [www.ricabor.realtor](http://www.ricabor.realtor).)
- Appraisal or Real Estate license (copy.)
- Letter of Good Standing from your Manager verifying your start date, or provide a copy of DBR's transfer of license form.
- Letter of Good Standing from your previous Board.
- Class certificate on the National Association of REALTORS® Code of Ethics. Completion date **must comply with** the biennial of 1/1/19—12/31/21. (copy)

Be sure to view this [document](#) on commonly asked questions and answers and to learn more about membership privileges and obligations. *Applications received in complete order will be processed in approximately 48-72 business hours. Applicants will be notified BY EMAIL regarding their membership status and will be provided with the schedule of required courses, including the New Member Orientation Class and the New Member Code of Ethics class. Visit [www.ricabor.realtor](http://www.ricabor.realtor) for upcoming events and more information on valuable member services.*



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### 2021 REALTOR® Membership Dues as Prorated Monthly

NOTES: Per Article X, Section 2 (a)(1), of our Bylaws, Dues shall not be prorated if a licensee held a membership during the preceding calendar year.

Please add the application fee or reinstatement fee to the subtotal.

Reinstatement fees are \$150 for Principals & \$125 for Associates - whose membership has lapsed  
 Application fees are \$200 for Principals & \$150 for Associates - upon initial application with the Board

\*\*\*See other items needed below the grid\*\*\*

	Rhode Island Commercial & Appraisal Board of REALTORS®	RI Association of REALTORS®	National Assn. of REALTORS® Dues	NAR Special Assessment (REALTOR® Image Advertising Campaign)	<u>SUBTOTAL ONLY</u>	RPAC**	Total with a \$150 App Fee Plus RPAC	Total with \$150 App Fee & No RPAC
January	\$ 225.00	\$ 196.50	\$ 150.00	\$ 35.00	\$ 606.50	\$ 25.00	\$ 781.50	\$756.50
February	\$ 206.25	\$ 180.13	\$ 137.50	\$ 35.00	\$ 558.88	\$ 25.00	\$ 733.88	\$708.88
March	\$ 187.50	\$ 163.75	\$ 125.00	\$ 35.00	\$ 511.25	\$ 25.00	\$ 686.25	\$661.25
April	\$ 168.75	\$ 147.38	\$ 112.50	\$ 35.00	\$ 463.63	\$ 25.00	\$ 638.63	\$613.63
May	\$ 150.00	\$ 131.00	\$ 100.00	\$ 35.00	\$ 416.00	\$ 25.00	\$ 591.00	\$566.00
June	\$ 131.25	\$ 114.63	\$ 87.50	\$ 35.00	\$ 368.38	\$ 25.00	\$ 543.38	\$518.38
July	\$ 112.50	\$ 98.25	\$ 75.00	\$ 35.00	\$ 320.75	\$ 25.00	\$ 495.75	\$470.75
August	\$ 93.75	\$ 81.88	\$ 62.50	\$ 35.00	\$ 273.13	\$ 25.00	\$ 448.13	\$423.13
September	\$ 75.00	\$ 65.50	\$ 50.00	\$ 35.00	\$ 225.50	\$ 25.00	\$ 400.50	\$375.50
October	\$ 56.25	\$ 49.13	\$ 37.50	\$ 35.00	\$ 177.88	\$ 25.00	\$ 352.88	\$327.88
November	\$ 37.50	\$ 32.75	\$ 25.00	\$ 35.00	\$ 130.25	\$ 25.00	\$ 305.25	\$280.25
December	\$ 18.75	\$ 16.38	\$ 12.50	\$ 35.00	\$ 82.63	\$ 25.00	\$ 257.63	\$232.63

All returned checks may be collected electronically and are subject to a \$25 returned check fee.

\*\*Voluntary RPAC (REALTORS political Action committee) contributions are optional. Suggested contribution levels are \$25 for Associates and \$99 for Principals. Only personal checks or credits can be accepted on RPAC contributions due to RI Law.



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RPAC Contributions are not deductible for income tax purposes. RPAC contributions are voluntary and used for political purposes. You may refuse to contribute without reprisal or otherwise affecting your membership rights. 70% of your contribution goes to your State Association to support state and local political candidates. 30% is sent to National RPAC to support federal candidates against your limits under 2 U.S.C 441a.

\*\*\*Please provide:

1. Copy of real estate or appraisal license.
2. Completed application for REALTOR membership with payment included.
3. Letter of affiliation from the Principal or copy of license transfer form filed with DBR.
4. Board Certification form if you are a new Principal/Office
5. If you are transferring for another Board, please provide a letter of good standing for your previous Board.
6. If you are transferring from another Board, please provide a copy of your Code of Ethics class certificate for the biennial.

Please contact our office if you have any questions or would like to verify amount due. We accept mailed, faxed & emailed applications.

*RICABOR leads, supports, and inspires excellence in its members through education, advocacy and business development*



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**For RICABOR Use Only**

NRDS ID: \_\_\_\_\_

Office ID: \_\_\_\_\_

Start date: \_\_\_\_\_

Payment: \_\_\_\_\_

Rev. 12/19

## APPLICATION FOR REALTOR® MEMBERSHIP

### Membership Type:

PRINCIPAL REALTOR®  REALTOR®  CHIEF APPRAISER/PRINCIPAL  APPRAISER

*I hereby submit the following information for your consideration:*

### Contact Information

#### PERSONAL/HOME INFORMATION:

Name (as show on license): \_\_\_\_\_  
First M.I. Last Name Suffix

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
(If different than above)

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_ 2nd Email Address: \_\_\_\_\_

#### OFFICE INFORMATION:

Name of Firm/Office: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

Mailing Address: \_\_\_\_\_  
(If different than above) Street City State Zip

Office Phone: \_\_\_\_\_ Fax Number: \_\_\_\_\_

#### Preferred Contact Method:

Mailing Address:  Home  Office  Other: \_\_\_\_\_  
Phone:  Cell  Office  Other: \_\_\_\_\_

#### Business Type:

- Corporation
- Sole
- Proprietorship
- DBA
- Partnership

#### Office is:

- Main Office
- Branch Office
- Single Office

#### Position with Firm:

- Independent Contractor
- Principal
- Partner
- Corporate Officer
- Trustee
- Employee
- Other: \_\_\_\_\_

### License Information

License Number: \_\_\_\_\_ State of Issue: \_\_\_\_\_ First Licensed in State: \_\_\_\_\_

Year

License Type:  Broker  Corporate  Appraiser

Have you been engaged continuously in the business since first licensed?  Yes  No

If no, during what years were you in business? \_\_\_\_\_

Present location established: \_\_\_\_\_ Name of Previous office: \_\_\_\_\_

Do you hold, or have you ever held, a license in any other state?  Yes  No

If "Yes", what state? \_\_\_\_\_

Has your real estate license in this or any other state been suspended or revoked or have you or your firm been found in violation of state real estate licensing regulations or other laws prohibiting unprofessional conduct rendered by the courts or other lawful authorities within the last three (3) years?

Yes  No

If "Yes", specify the place(s) and date(s) of such action, and detail the circumstances relating thereto:

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### Additional Information

How did you hear about us?  Your office  Our Staff  Website  Other \_\_\_\_\_

Website address: \_\_\_\_\_

Do you speak a second language?  Yes  No

If "Yes", what language(s) do you speak? \_\_\_\_\_

Have you ever been a member of a REALTOR® Association?  Yes  No

If "Yes", complete the following:

NRDS Membership ID #: \_\_\_\_\_

Name of Association: \_\_\_\_\_

Membership period: \_\_\_\_\_

Date of last National Association of REALTORS® Code of Ethics Training: \_\_\_\_\_

Have you ever been refused membership in any other REALTOR® Association?  Yes  No

If "Yes", state the basis for each such refusal and detail the circumstances related thereto:

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Have you been found in violation of the Code of Ethics or other membership duties in any REALTOR® Association in the past three (3) years or are there any such complaints pending?  Yes  No

If "Yes", provide details as an attachment.

Have you ever had membership in any other REALTOR® Association suspended, expelled or terminated?

Yes  No

If "Yes", state the basis for each such refusal and detail the circumstances related thereto:

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Is the office address stated on page 1 your principal place of business?  Yes  No

If "No", or if you have any branch offices, please indicate and give addresses:

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Have you participated in a Multiple Listing Service?  Yes  No

Where? \_\_\_\_\_

(Optional)

In what phases of real estate do you specialize? \_\_\_\_\_

Do you hold a college degree?  Yes  No

If "Yes", Degree \_\_\_\_\_

Are you now employed in any business or profession other than real estate?  Yes  No

If "Yes", position and location: \_\_\_\_\_

Please share any civic and/or business accomplishments or activities:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Payment and Signature

*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, shall be grounds for revocation of my membership if granted. By signing below, I give the REALTOR® Association (Local, State and National) permission to mail, telephone, email, fax and/or text me about association activities, products and services. I also certify that I have downloaded and will subscribe to the REALTOR® Code of Ethics and the Bylaws, Constitution and Rules and Regulations of the Rhode Island Commercial & Appraisal Board, the RI Association of REALTORS® and the National Association of REALTORS®, available on the Board's website at [www.ricabor.realtor](http://www.ricabor.realtor). I agree that, if accepted for Membership in the Board, I shall pay the fees and dues as from time to time established. I understand that my membership dues are an annual obligation and that my membership expires December 31<sup>st</sup>. I understand that my renewal invoice is paperless and will be available online on the member portal on [www.ricabor.realtor](http://www.ricabor.realtor) in October of each year.*

**I HEREBY APPLY For** membership in the Rhode Island Commercial and Appraisal Board of REALTORS®, enclosing my check in the Amount of \$\_\_\_\_\_\* , which is to be returned to me in the event of non-election. In the event of my election, I agree to abide by the Code of Ethics of the NATIONAL ASSOCIATION OF REALTORS®, **including the duty to arbitrate any future disputes with another Member in accordance with the Board's arbitration procedures.** I also agree to abide by the Constitution, Bylaws, and Rules and Regulations of the above Board, the State Association, and the National Association and if required, I further agree to satisfactorily complete a reasonable and non-discriminatory written examination of such Code, Constitutions, Bylaws and Rules and Regulations. I understand membership brings certain privileges and obligations that require compliance. Membership is final only upon approval by the Board of Directors and may be revoked should completion of requirements not be completed within timeframe established in the Board's Bylaws. I understand that I will be required to complete periodic Code of Ethics training as specified in the Board's Bylaws as a continued condition of membership. I consent that the Board, through its 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 Board 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.

**NOTE:** Applicant acknowledges that if accepted as a Member and he/she subsequently resigns from membership in the Board with an ethics complaint or arbitration request pending, the Board of Directors may condition the right of the resigning Member to reapply for membership upon the 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 a Member resigns without having complied with an award in arbitration, the Board of Directors may condition any reapplication of the former Member upon his/her promise to pay the award, plus any costs that have previously been established as due and payable by the former Member, provided that the award has not, in the meanwhile been otherwise satisfied. If applicant resigns or otherwise causes membership to terminate, the duty to submit to arbitration continues in effect even after membership lapses or is terminated, provided the dispute arose while applicant was a REALTOR®.

\*Dues are prorated monthly. Application Fees are not prorated. All dues/fees are not refundable and are not tax deductible as charitable contributions. Portions of your payment may be deductible as ordinary and necessary business expenses.

**Applicant's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Thank you for selecting the Rhode Island Commercial & Appraisal Board of REALTORS® as your Board of Choice! Your completed application may be emailed to [info@ricabor.org](mailto:info@ricabor.org), faxed to (401)-732-1708 or mailed to RICABOR, 2400 Post Road, Warwick, RI 02886.



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### Credit Card Authorization

I authorize the Rhode Island Commercial and Appraisal Board of REALTORS® to charge my dues with a credit card or deduct the amount owed from my checking account as indicated below. ***(To avoid delays in processing, please print clearly.)***

#### PAYMENT BY CREDIT CARD

Name on credit card: \_\_\_\_\_ Amount to be charged: \$\_\_\_\_\_

MasterCard  Visa  Discover  American Express

Credit Card Type:  Personal credit card  Corporate credit card

Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ CVV: \_\_\_\_\_

Billing Address: \_\_\_\_\_  
Street City State Zip

Email Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*\*Please note: Once you have been processed, a payment receipt will be emailed to you in approximately 48-72 business hours. Your payment will appear on your statement as "REALTOR® Association/MLS."*

If the credit card appearing above is not yours, the following written authorization must be received with the application:

I am not the applicant, but authorize RICABOR to charge the above amount to the credit card information provided.

Print Name: \_\_\_\_\_ Sign Name: \_\_\_\_\_ Date: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

\_\_\_\_\_ Last 4 digits of Credit Card

Circle one: Mastercard Visa Discover American Express

Thank you for selecting the Rhode Island Commercial and Appraisal Board of REALTORS® as your Board of Choice. This form may be faxed to our office at (401) 732-1708.