



WHITE MOUNTAIN
ASSOCIATION OF REALTORS®

3320 Kay Road
Lakeside, AZ 85929
928-537-1107 phone | 928-537-3788 fax
wmar@wmaronline.com
www.wmaronline.com

INDIVIDUAL SECONDARY MEMBERSHIP APPLICATION CHECKLIST

To ensure your application is processed as quickly as possible, please complete and/or include ALL applicable items with your application.

- ☐ All signature and initial lines are filled in and dated, where applicable, on all pages of the application.
- ☐ FLEX MLS User IDs must be 6-9 characters in length and must be alpha-numeric, with no symbols or punctuation.
- ☐ Your email address is complete, correct, and legible.
- ☐ Your Broker has signed and dated the application where indicated.
- ☐ If a branch manager is signing on behalf of the Broker, a letter authorizing the signing on behalf of the Broker must be included.
- ☐ If you answered YES to any of the 5 questions on page three **, a letter of explanation must be included.
- ☐ **Form of payment** has been attached to application or has been provided via phone or in person.
- ☐ A copy of your most recent **Arizona Real Estate License CERTIFICATE**. (You may obtain your certificate once you log in here: <https://ptl.az.gov/dre/#/login>)
- ☐ A copy of your valid **Photo ID** – both front and back.
- ☐ If the White Mountain Association of REALTORS® will not be your PRIMARY Association, please include a **“Letter of Good Standing”** from your Primary Association dated within the past 30 days.
- ☐ Have your primary Supra key provider sign the **Cooperating Supra Agreement** and attach to application, if applying to co-op your existing key.

Your membership application will be processed within **48 hours*** upon receipt of a **COMPLETE** application packet.

*excluding weekends and holidays

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INDIVIDUAL SECONDARY MEMBERSHIP APPLICATION

PLEASE PRINT/COMPLETE ALL FIELDS, IF NOT APPLICABLE, PLEASE USE N/A

Individual Name: _____
Last First MI (Nickname)

Physical Address: _____
Street City State Zip

Mailing Address: _____
Street City State Zip

Home Phone Cell Phone Email Address Website Address

wmar. _____ Date of Birth: _____
REQUESTED FLEX MLS USER ID mm/dd/yy

Have you previously held a WMAR Membership? ☐ Yes ☐ No

Office Affiliation: _____
Company Name Office Phone # Fax

Physical Address: _____
Street City State Zip

Individual Real Estate License # _____

Office Real Estate License # _____

I am applying for:

- ☐ **Individual Secondary Membership (REQUIRED)**
\$228 Annual WMAR Dues + \$350 One-time Application Fee
- ☐ **Individual MLS Subscription**
\$120 Annual MLS Subscription + \$150 One-time Setup Fee
- ☐ **SUPRA Key Co-Op**
\$125 One-time Setup Fee

Individual NRDS#: _____ Office NRDS #: _____

PRIMARY Field of Business: _____ PRIMARY Board: _____
Acronym

Has this office previously held a WMAR Membership? ☐ Yes ☐ No

Does this office hold a WMAR Membership? ☐ Yes ☐ No

Position with company: ☐ Owner ☐ Designated Broker/Owner ☐ Designated Broker

Please check any designations that you hold: ☐ ALC ☐ CPM ☐ ARM ☐ CCIM ☐ CIPS ☐ CRB ☐ CRE ☐ CRS

☐ GAA ☐ GRI ☐ LTG ☐ RAA ☐ SIOR ☐ OTHER _____

Email address for online billing: _____

I affirm that I will (or will be) actively endeavoring to list real property and accept (or will accept) offers of cooperation and Compensation from other Participants in the MLS? ☐ Yes ☐ No **Applicant's Initials:** _____

****This section must be completed by all applicants. If the answer is yes to any of the following questions, please provide an appropriate explanation on a separate sheet of paper and attach it to this application:**

- | | | |
|---|------------------------------|-----------------------------|
| 1. Do you hold, or have you ever held, a real estate license in any other state? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 2. Has your real estate license in this or any other state ever been suspended or revoked? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 3. Has your membership in another real estate Association ever been suspended or revoked? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 4. Are there now, any pending or unresolved complaints, or have there been within the past 3 years against you with any real estate Association or any state/federal regulatory agency? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 5. Have you ever been convicted of a felony? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

Please read the following:

With this application, I hereby apply for membership in the White Mountain Association of REALTORS®. In the event my application is not accepted, I understand I will be refunded any monies paid,

*****As further condition of membership, I agree to complete the WMAR New Member Orientation class within 60 days of my application date. Failure to attend will result in the termination of my membership and forfeiture of all dues and fees paid. Applicant's Initials:** _____

I further agree to familiarize myself with the Code of Ethics of the National Association of REALTORS® including the duty to arbitrate business disputes in accordance with the *Code of Ethics and Arbitration Manual* of this Association and the *Bylaws*, *Policy Statements* and *MLS Rules & Regulations* of the White Mountain Association of REALTORS®, the Arizona Association of REALTORS®, and the National Association of REALTORS®.

I further agree that my act of paying dues shall evidence my initial and continuing commitment to abide by the aforementioned *Code of Ethics*, *Bylaws*, *Policy Statements*, *MLS Rules & Regulations*, and duty to arbitrate; all as from time-to-time may be amended. Finally, I consent and authorize the White Mountain Association of REALTORS® to invite and receive information and comment about me from any Member, or other person or Association. I further agree that any information furnished to the Association in response to any such invitation shall be conclusively deemed to be privileged and will 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 or is expelled from membership in the Association with an ethics complaint or arbitration request pending, the Board of Directors may condition renewal of membership upon 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 applicant resigns or is expelled from membership without having complied with an award in arbitration, the Board of Directors may condition renewal of membership upon his/her payment of the award, plus any costs that have been established previously as due and payable in relation thereto, provided that the award and such costs have not, in the interim, been otherwise satisfied.

NOTE: Dues payments to the White Mountain Association of REALTORS® are not tax deductible as charitable contributions. Portions of such payments may be tax deductible as ordinary and necessary business expenses. The White Mountain Association of REALTORS® does not prorate its annual dues. Per the Association Bylaws, once membership is accepted, all dues are non-refundable. All White Mountain Association of REALTORS® membership re-applications are subject to re-payment of dues and application fees.

I certify the information supplied on this application is correct and that I have read and accept all the conditions of application described above. I also agree that if accepted for membership, I shall pay the dues and fees as from time-to- time established.

Applicant's Printed Name:_____

Applicant's Signature: _____**Date:** _____

Broker's Printed Name:_____

Broker's Signature: _____**Date:** _____

White Mountain Association of REALTORS®
Cooperating Supra Key Agreement

Phone: 928-537-1107 Fax: 928-537-3788

Email: wmar@wmaronline.com

Date: _____

Agent Name: _____

You may pay by credit card (Visa, MasterCard, American Express or Discover).

There is a \$ 125.00 fee to co-op your key.

Primary Board / MLS: _____

KEY # _____ **PIN Code:** _____

Primary Board / MLS Signature: _____ **Date:** _____

Lockboxes from other MLSs do not work in the WMAR MLS. You will need to lease one from WMAR. Your broker must give written permission for WMAR to release a lockbox to you, the member. Primary and Secondary members may use the lockboxes at no charge. Non-Members may lease a lockbox for \$150.00, the refundable amount is \$120.00. Refunds will be issued via check after the lockbox has been returned.

Lockboxes must be returned upon termination of your membership with WMAR.

PLEASE NOTE: Your Primary Board / MLS must sign this form BEFORE Supra access is granted.



CREDIT / DEBIT CARD MEMBERSHIP PAYMENT AUTHORIZATION

***** If paying by check, please attach check to application*****

DATE: _____

NRDS #: _____

CIRCLE CARD TYPE:

VISA AMERICAN EXPRESS MASTERCARD DISCOVER

NAME AS IT APPEARS ON CARD

CREDIT / DEBIT CARD NUMBER

EXPIRATION DATE

CVS Code

AMOUNT APPROVED \$: _____

NEED RECEIPT? ☐ YES ☐ NO

EMAIL ADDRESS (if different from application): _____

(Office Use Only) _____