



**CAPE COD & ISLANDS**  
**ASSOCIATION of REALTORS®, INC.**

22 Mid Tech Drive, West Yarmouth, MA 02673

Voice: 508-957-4300 Fax: 508-771-0067

[www.cciaor.com](http://www.cciaor.com)

**Application for REALTOR® Membership**

To the Cape Cod & Islands Association of REALTORS®, Inc.: I hereby apply for REALTOR® Membership in the above named Association and am enclosing my check in the amount of **\$50 for a one time application fee**. My application fee will 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®, which includes the duty to arbitrate, and the Constitution, Bylaws and Rules and Regulations of the above named Association, the State Association and the National Association, and if required, I further agree to satisfactorily complete a reasonable and non-discriminatory written examination on 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, such as orientation, not be completed within timeframe established in the association's bylaws. I understand that I will be required to complete periodic *Code of Ethics* training as specified in the association's bylaws as a continued condition of membership.

***NOTE:** Applicant acknowledges that if accepted as a member and he/she subsequently resigns from the Board or otherwise causes membership to terminate with an ethics complaint pending, the Board of Directors may condition renewal of membership upon applicant's certification that he/she will submit to the pending ethics proceeding and will abide by the decision of the hearing panel. 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®.*

I understand that should I withdraw this application or fail to attend the New Member Orientation class after receiving the second notice; this application will be stamped CANCELLED. The Application fee will be kept by the Association as a service charge. I will be required to remit an additional \$50 if I should decide to reapply. If my application is returned to me, I understand that the Designated REALTOR® of my office will receive a non-member assessment billing backdated to the time my application was submitted.

Signature of Applicant: \_\_\_\_\_

I hereby submit the following information for your consideration:

Name: \_\_\_\_\_

Real Estate License #: \_\_\_\_\_

Licensed/certified appraiser: [ ] Yes [ ] No Appraisal License #: \_\_\_\_\_

Office Name: \_\_\_\_\_

Office Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Residence Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Preferred Mailing: [ ] Home [ ] Office Preferred Phone: [ ] Home [ ] Office

Are you presently a member of any other Association of REALTORS®? [ ] Yes [ ] No

If yes, name of Association and type of membership held: \_\_\_\_\_

Have you previously held membership in any other Association of REALTORS®? [ ] Yes [ ] No

If yes, name of Association and type of membership held: \_\_\_\_\_

Have you been found in violation of the *Code of Ethics* or other membership duties in any Association of REALTORS® in the past three (3) years or are there any such complaints pending? [  ] Yes [  ] No (If yes, provide details as an attachment.)

If you are now or have ever been a REALTOR®, indicate your NAR membership (NRDS) #: \_\_\_\_\_ and last date (year) of completion of NAR's *Code of Ethics* training requirement: \_\_\_\_\_

By signing below 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. I further agree that, if accepted for membership in the Association, I shall pay the fees and dues as from time to time established. **NOTE:** Payments to the Cape Cod & Islands Association of REALTORS®, Inc. are not deductible as charitable contributions. Such payments may, however, be deductible as an ordinary and necessary business expense. No refunds.

By signing below I further 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 numbers, 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.

Dated: \_\_\_\_\_ Signature: \_\_\_\_\_

***Optional Information***

Date of Birth: \_\_\_\_\_

Specialty: [  ] Residential [  ] Commercial [  ] Resort [  ] International [  ] Other: \_\_\_\_\_

How long with current real estate firm? \_\_\_\_\_

Previous real estate firm (if applicable): \_\_\_\_\_

Number of years engaged in the real estate business: \_\_\_\_\_



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**APPLICATION PROCEDURE FOR REALTOR® MEMBER**

- Upon receipt of your completed application form and a copy of your current Massachusetts Broker's or Salesperson's License, accompanied by payment of the \$50 application fee, the Membership Committee will process your application.
- Your name, as a new applicant, will be published in the Cape Cod & Islands Association of REALTORS®, Inc. newsletter.
- According to state regulation, a copy of your current Massachusetts Broker's or Salesperson's License must be displayed in your office.
- You will be scheduled for a New Member Orientation Class and notified of this class at least two weeks in advance.
- After the publication period your application will be brought to the Membership Committee for recommendation of approval and then to the Board of Directors for final approval.
- If elected to membership, you will be notified of your acceptance and your membership will become effective upon payment of your dues. The annual dues are pro-rated on a monthly basis from the time of acceptance.
- At the completion of the New Member Orientation you will be inducted into membership and receive your REALTOR® pin.

If you have any questions please contact the CC&IAOR Membership Department at  
508-957-4300 or 1-800-442-0006.