REALTOR® APPLICATION

THE LONG ISLAND BOARD OF REALTORS®, Inc.

APPLICANT SIGNATURE (Salesperson/Associate Broker)

300 Sunrise Highway, West Babylon, NY 11704 (631) 661-4800 (718) 739-8700 FAX: (631) 661-8136 Email – LIBORMEM@LIREALTOR.COM

FOR OFFICE USE ONLY	:
MEMBER #	_ FIRM #
PAYMENT INFO	

I hereby apply for REALTOR® Membership in the Long Island Board of REALTORS®, Inc. (LIBOR). It is understood that this application includes membership in the New York State Association of REALTORS® (NYSAR) and the National Association of REALTORS® (NAR). I agree that, if elected a member of LIBOR, I will abide by the By-Laws, policies and procedures of LIBOR, the By-Laws of NYSAR, the Constitution and By-Laws of NAR, and I will abide by the Code of Ethics of NAR, as from time to time amended.

Upon termination of said membership for any cause, I understand that any payment of dues is **non-refundable** and I agree to discontinue the use of the term REALTOR® and return to LIBOR all certificates, signs, seals, or other indications of membership in LIBOR, NYSAR, and NAR.

To attain full REALTOR® membership, one <u>must_complete</u> a New Member Orientation program within 90 days of joining LIBOR. Failure to complete the Orientation within the required time-period would result in suspension. This is a required course that satisfies the National Association of REALTORS® requirement for ethics training, and includes an Introduction to membership. Your membership will be considered <u>Provisional</u> until completion of this course. This requirement can be satisfied through instruction provided by LIBOR either by an on-site course at no cost, or for your convenience, an on-line course for an additional fee.

	PLEASE PRINT (all fie	lds are required)	
Name (as shown on license) Last, First, M.I.		Office Name:	
Office Address:	Town:	State:	Zip:
Office Phone:	Fax#	E-Mail Address:	
Web Address:	Date of Birth:	Preferred Mailing Address: ☐ Home	☐ Office
Residence Address:	Town:	State:	Zip:
Home Phone:	Cell Phone:	Preferred Phone: ☐ Home	☐ Office ☐ Cell
Primary Field of Business:	Second	ary Field of Business:	
Are you now, or have you ever been a memb	per of another REALTOR® board?	☐ Yes ☐ No	
If yes, specify name of board		NRDS #	
Calls to Action, Upcoming Events, Excluchecking the "Yes" boxes below! YES NO Sign up for LIBOR's text a your mobile device! Cell Phone Number number indicated above.)	alert services to receive importan	t industry news, products, services a	and benefits directly to
By checking Yes, you consent to receive sunumber. Such consent is not a condition of plaws may place limits on communications the carrier regarding pricing. You may opt-out of by contacting Membership & Billing at 631-66	urchase. Message and data rates n at I am waiving to receive all commi receiving such text messages at an	ay apply. This consent recognizes that considerations as part of my membership. Only time by following the instructions acco	certain state and federal Check with your wireless
☐ YES ☐ NO I consent that LIBOR may or e-mail address set forth above for ir messages at any time by following the in or emailing us at libormem@lirealtor.cor LIBOR in the future.	nformational and marketing purp structions accompanying the me	oses. You may opt-out of receiving ssage, by contacting Membership & l	g such fax and e-mail Billing at 631-661-4800
If your original license is less than 3 morprogram, you will not be entitled to LIBOR be pro-rated annual REALTOR® dues, which we broker in order to take advantage of this program.	enefits or services until the end of the vill not include the initial 3 month tr	e trial period. At that time, you will be s al period. You must be affiliated with y	ent a statement for your
Yes, I wish to take advantage of the tria No. I prefer to make my dues payment to			

DATE

Rev 5/2020