



## Application for Realtor Membership for ECIBOR

To the East Central Indiana Board of REALTORS, I hereby apply for REALTOR membership in the above named Board and am enclosing my payment of \$ \_\_\_\_\_ for membership (2025) in Local, State, and National dues. Plus a \$250 one time application fee. For a total of \$ \_\_\_\_\_

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 Board. (You can request a copy of any of the above named documents.) I agree to participate in an orientation program set by the above named Association.

I agree to fill out the following information for the completion of my application:

Name \_\_\_\_\_

(Optional) Date of Birth \_\_\_\_\_

Email address \_\_\_\_\_

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

Licensed appraiser \_\_\_\_yes \_\_\_\_no Appraisal license # \_\_\_\_\_

Your position \_\_\_\_Principal \_\_\_\_Partner \_\_\_\_Branch Office Manager

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

Office address \_\_\_\_\_ Phone \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Home Address \_\_\_\_\_

Home/Cell Phone \_\_\_\_\_

Preferred Mailing \_\_\_\_Home \_\_\_\_Office

Preferred Publication \_\_\_\_Home \_\_\_\_Office

Preferred Phone \_\_\_\_Home \_\_\_\_Office

Are you presently a member in any other Association of REALTORS? \_\_\_\_yes \_\_\_\_no

I hereby certify that the 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. I further agree to pay the fees and dues as from time to time established (yearly membership dues).

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