



Greater Tulsa Association of REALTORS® Application for REALTOR® Membership

I hereby apply for REALTOR® membership with the Greater Tulsa Association of REALTORS®, Inc. (“GTAR”) and have made payment to GTAR for the application fee in the amount of \$_____ and for the GTAR annual dues (prorated) in the amount of \$_____.

The amount paid may be returned to me only in the event my application is not approved.

In the event of my election (approval of my application by the GTAR Board of Directors), I agree to abide by the Code of Ethics of the National Association of REALTORS®(which includes the duty to arbitrate), and the Bylaws and Rules and Regulations of GTAR, and the Constitution, Bylaws and Rules and Regulations of the Oklahoma Association of REALTORS® (“OAR”) and the National Association of REALTORS®(“NAR”).

I further agree to satisfactorily complete any written examination required and complete the New Member Code of Ethics Orientation. My membership may be terminated should I fail to timely complete all requirements set forth in the GTAR Bylaws and Rules and Regulations.

I acknowledge that if accepted as a member and I subsequently resigns from GTAR or otherwise cause my membership to terminate when an ethics complaint is pending, the GTAR Board of Directors may condition renewal of my membership upon my certification that I will submit to the pending ethics proceeding and will abide by the decision of the hearing panel. If I resign or otherwise cause my membership to terminate, I remain obligated to submit to arbitration any dispute that arose while I was a REALTOR®.

***Please use the fillable PDF format or print legibly.
Applications will not be accepted with illegible or missing information.***

Name _____

Home Address _____

City _____ State _____ Zip Code _____

Cell Phone # _____ Email _____

Real Estate License # _____ Licensed/Certified Appraiser No Yes License # _____

Firm Name _____

Firm Address _____

Firm Phone # _____

Broker Name _____

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

If yes, name of Association and type of membership held _____

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

If yes, name of Association and type of membership held _____

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

If yes, provide details as an attachment.



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Have you or your firm been found in violation of any state licensing agency regulations involving real estate within the last three (3) years? [] No [] Yes
If yes, provide details as an attachment.

If you are now, or have ever been, a member of the National Association of REALTORS® please provide your NAR Membership # (NRDS) _____.

Please provide the last date (year) of completion of the NAR Code of Ethics training requirement _____. Please use "NA" if not applicable.

Are you a Principal, Partner, Corporate Officer or Branch Office Manager? [] No [] Yes
If yes, you must complete the Supplemental Section of this application.

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. Payments to GTAR are not deductible as charitable contributions. You should consult your tax advisor to determine whether such payments are deductible as an ordinary and necessary business expense.

By signing below, I consent that the REALTOR® Associations (Local, State, National) and their subsidiaries, may contact me at the home address, telephone number(s), or email address listed above or any subsequent address, telephones number(s), or email address that may be provided by me to GTAR.

Signature of applicant

Date of signature

Name of Sponsoring Broker (print)

I certify that the above individual is presently associated with my firm and recommend him/her for REALTOR® membership with the Greater Tulsa Association of REALTORS®. I understand that I will be personally responsible for the professional conduct of the individual while he/she is associated with my firm, and that I will be liable for any dues not paid by the individual.

Signature of broker

Date of signature



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Supplemental Section for REALTOR® Membership for Designated Broker/Branch Manager

Firm Information: [] Sole Proprietor [] Partnership [] Corporation [] LLC

Your Position: [] Partner [] Corporate Officer [] Branch Officer Manager

Names of other Partners/Officers of your firm:

Three horizontal lines for entering names of other partners/officers.

Have you ever been refused membership in any other Association of REALTORS®? [] No [] Yes
If yes, provide the basis for such refusal and detail the circumstances as an attachment.

Is the office address, as stated above, your principal place of business? [] No [] Yes
If no, or if you have any branch offices, please provide the addresses below.

Three horizontal lines for providing branch office addresses.

Have you, or your firm, been found in violation of state real estate licensing regulations within the last three (3) years? [] No [] Yes
If yes, please provide details as an attachment.

Have you, or your firm, been convicted, adjudged, or otherwise recorded as guilty by a final judgment of any court of competent jurisdiction of a felony or other crime? [] No [] Yes
If yes, please provide details as an attachment.

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Signature of applicant

Date of signature