



APPLICATION TO **TRANSFER REALTOR®** MEMBERSHIP TO  
THE ROBERTSON COUNTY ASSOCIATION OF REALTORS®

P.O. Box 426 OR 2215 Memorial Blvd. – Springfield, TN 37172

Office: (615)384-0816 Fax: (615)384-0117

Please send completed application to:

[support@rcar.net](mailto:support@rcar.net) Or [denice.oneil@rcar.net](mailto:denice.oneil@rcar.net)

I hereby apply for MEMBERSHIP as REALTOR® or REALTOR ASSOCIATE in the ROBERTSON COUNTY ASSOCIATION OF REALTORS & enclose my payment in the amount of \$ \_\_\_\_\_ or I authorize the payment of my dues and transfer or reinstatement fee by charging my \_\_\_\_\_ (type) credit card. My credit card number is: \_\_\_\_\_ and the expiration date is: \_\_\_\_\_ and the security code is: \_\_\_\_\_, which I understand will be returned in the event I am not accepted to membership.

In the event I am approved, I agree to thoroughly familiarize myself and abide 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 & THE ABITRATION MANUAL OF THE ASSOCIATION and the CONSTITUTIONS, BYLAWS, and THE RULES AND REGULATIONS OF THE ROBERTSON COUNTY ASSOCIATION, THE TENNESSEE ASSOCIATION AND THE NATIONAL ASSOCIATION, and I further agree to complete satisfactorily reasonable and nondiscriminatory written examination covering such code, constitutions, bylaws, rules and regulations, and duty to arbitrate. I further agree that my act of paying dues shall evidence my initial and continuing commitment to abide by the aforementioned code of ethics, constitutions, bylaws, rules and regulations, and duty to arbitrate, all as from time to time amended. Finally, I consent that and authorize the ASSOCIATION, through its membership committee or otherwise to invite and receive information and comment about me from any member or other person, and I agree that any information and comment furnished to the ASSOCIATION by any member or other person in response to any such invitation shall be conclusively deemed to be privileged and not form the basis of any action by me for slander, libel, or defamation of character.

Name as it appears on your license: \_\_\_\_\_

License Number: \_\_\_\_\_ Date Originally Licensed: \_\_\_\_\_

NRDS Number: \_\_\_\_\_ Residential Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Membership with RCAR will be: Primary: \_\_\_\_\_ or Secondary: \_\_\_\_\_

Did you pay last year's dues: Yes or No

Have you ever been refused membership in an association: \_\_\_\_\_ If Yes, please explain: \_\_\_\_\_

Has your Real Estate license ever been revoked or suspended? \_\_\_\_\_ If Yes, please explain: \_\_\_\_\_

Name of Firm: \_\_\_\_\_ Name of Broker: \_\_\_\_\_

Address of Firm: \_\_\_\_\_

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.

Signed \_\_\_\_\_ Date \_\_\_\_\_