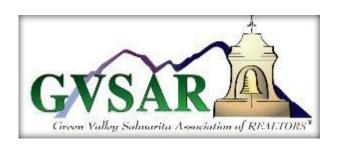
www.gvsar.com



GVSAR Office Hours: Monday—Friday 8:00 a.m.—3:00 p.m.

New Member Application Checklist:

Thank you for your interest in joining the Green Valley/Sahuarita Association of REALTORS® (GVSAR).

In order to expedite the processing of your membership application, please be sure to include the following with your completed application signed by your broker.

- A Letter of Good Standing from your primary/former association, if you are currently a member of NAR with another local REALTOR® association.
- Full payment of applicable dues and fees.

We are in the Continental Plaza off the **Continental exit on 119**. When you enter the mall, McDonalds is on your right and Safeway across the parking lot, on your left. Continue to the northwest end of the mall and park close to True Value and Title Security. There is a courtyard between the two and we are **located upstairs in the** two story portion of the plaza. The elevator is across from Title Security and we are on the second floor overlooking the courtyard-Suite 244.

We look forward to welcoming you as a new member of GVSAR.



APPLICATION FOR REALTOR® MEMBERSHIP

FOR GVSAR OFFICE USE ONLY

Designated REAL	.TOR®	Primary		MLS ID	NAR ID
	Ш	Secondary			
REALTOR®		If Secondary, name	of		
Appraiser		Primary Associatio	on: 		
Southern Arizona (MLS nonrefundable. I agree days of application. I w National Association of Arbitration Manual of N the National Associatio	SSAZ), ele as a cor ill thorou REALTO NAR and n. I furth	nclosing required payment ndition of membership to ughly familiarize myself w RS®, including the duty to the Bylaws and Rules and ter agree that my act of pa	nt. I und comple ith the I c arbitra d Regula aying du		he application fees are Code of Ethics Class within 60 and the Code of Ethics of the ace with the Code of Ethics and the Arizona State Association and continuing commitment to abide
NOTE: Applicant acknown other boards/association	wledges ons in th	that the Association wil ne form of Letter of Goo	l mainta d Stand	ain a membership file of informing, when a member subseque	ation which may be shared with ntly seeks membership. I hereby s designated on my application.
otherwise causes mem membership upon appl Hearing Panel. If appl	bership licant's c icant res	to terminate with an Eth ertification that he/she w igns, or otherwise cause	nics com vill subm es memb	plaint pending, the Board of Di nit to the pending proceeding an	resigns from the Association o rectors may condition renewal o d will abide by the decision of the o submit to arbitration continue as a REALTOR®.
I acknowledge that I ha	ive read	the above and hereby sub	omit the	following information for your c	onsideration:
				Date	
Signature of Applicant					
Printed Name:					
I concur with the signed	l stateme	ent of intent above.			

Signature of Broker/Designated REALTOR®

PERSONAL INFORMATION		
Type/Print Name as shown on your Licens	se	
		k name:
Home Address:		
City:	State: Z	ip:
DOB:Email	Address:	
COMPANY INFORMATION		
Office Name:	N	1LS Office ID
Office Address:		
Office Phone:	0	ffice Fax:
DDEEEDDED MAAII ING /CONTA	CT INCORNATION.	
PREFERRED MAILING/CONTAC	T INFORMATION:	
Preferred Phone: O ffice	Cell Phone #:	
	-	
		Part Time
Are you part of a Team-NAME?		
APPLICANT INFORMATION:		
Are you currently a member of any other	Association of REALTORS®2 Ves	NO
If yes, provide name of Association & NRD		
ryes, provide name of Association & MA		
Have you previously held membership in ar		
If yes, provide name of Association:		
Have you been found in violation of the Co three (3) years or are there any such compl		in any Association of REALTORS® in the past NO
Have you ever been refused membership ir		
Do you hold, or have you ever held, a real e		
If so, where?		
What REALTOR® professional designations		
·	CDS CDE CDI SDS	CDEC DDQ Other