

361 2nd Street NW
Hickory, NC 28601

Phone 828.322.8249

Dear Applicant:

Congratulations and welcome to the Catawba Valley Association of REALTORS®, Inc.

PLEASE READ THE APPLICATION CAREFULLY BEFORE COMPLETION AND SIGNING.

An *application fee of **\$500.00 and REALTOR® Dues (see attached prorated schedule)** are due upon submission of application. If paying by check, make payable to: Catawba Valley Association of REALTORS® (CVAR).

You will be required to attend our New Member Orientation Course, which consists of one day of training in the Code of Ethics. Your initiation into the Association will be conducted and you will receive your REALTOR® pin and Certificate of Completion immediately following Orientation.

Applicants for REALTOR® membership shall be granted provisional membership immediately upon submission of a completed application form and remittance of applicable association dues and any application fee. Provisional members shall be considered REALTORS® and shall be subject to all of the same privileges and obligations of membership. If for any reason you are unable to attend the scheduled course, written permission must be obtained from the CVAR Membership Director, prior to the date of Orientation. If the individual does not satisfy all of the requirements of membership (for example, completion of a mandatory orientation program) within 180 days from the Association's receipt of the application, membership shall be terminated.

Should you, in the future, transfer to another firm, a **\$50.00 transfer fee** is due to the Association of REALTORS®, along with a CVAR Transfer Form which can be obtained from the Association office.

We look forward to working with you, and should you have any questions, please give us a call.

Sincerely,

A handwritten signature in black ink that reads 'Elizabeth C. Hensley'.

Elizabeth "Beth" Hensley
Association Executive

**Applications are processed within hours of receipt. If for any reason you withdraw your membership, a portion of the application fee is refundable, provided you notify the board office within the first 72 hours of membership. Any request made beyond the initial 72 hours cannot be considered.*

2023 DUES SCHEDULE

APPLICATION FEE: \$500.00

Application fee and dues are payable upon submission of application.

REALTOR® dues shall not be prorated if the licensee held REALTOR® membership during the preceding calendar year.

The NAR Consumer Advertising Campaign Assessment is not prorated.

2023 REALTOR® DUES

MONTH	LOCAL	NC REALTORS®	NAR	NAR CAC ASSESSMENT	TOTAL DUES
January	\$150.00	\$185.00	\$150.00	\$45.00	\$530.00
February	\$137.50	\$169.58	\$137.50	\$45.00	\$489.58
March	\$125.00	\$154.17	\$125.00	\$45.00	\$449.17
April	\$112.50	\$138.75	\$112.50	\$45.00	\$408.75
May	\$100.00	\$123.33	\$100.00	\$45.00	\$368.33
June	\$87.50	\$107.92	\$87.50	\$45.00	\$327.92
July	\$75.00	\$92.50	\$75.00	\$45.00	\$287.50
August	\$62.50	\$77.08	\$62.50	\$45.00	\$247.08
September	\$50.00	\$61.67	\$50.00	\$45.00	\$206.67
October	\$37.50	\$46.25	\$37.50	\$45.00	\$166.25
November	\$25.00	\$30.83	\$25.00	\$45.00	\$125.83
December	\$12.50	\$15.42	\$12.50	\$45.00	\$85.42

2023 NON-DEDUCTIBLE PORTION OF DUES

NC REALTORS® DUES

Dues payments to NC REALTORS® are NOT deductible as charitable contributions for Federal income tax purposes. Such payments however, may be deductible as an ordinary and necessary business expense. NC REALTORS® lobbying dues are NOT deductible for income tax purposes. The portion of NC REALTORS® dues attributable to lobbying expenses that are not deductible is **\$29.00** (or 15.7%). The remainder of NC REALTORS® dues, **\$156.00**, may be deductible.

NAR DUES

Dues payments to NAR are NOT deductible as charitable contributions for Federal income tax purposes. Such payments however, may be deductible as an ordinary and necessary business expense. NAR lobbying dues are NOT deductible for income tax purposes. The portion of NAR dues attributable to lobbying expenses that are not deductible is **\$51.00** (or 34%). The remainder of NAR dues, **\$99.00**, may be deductible.

In addition to your 2023 NAR dues, NAR also assesses a mandatory Consumer Advertising Campaign assessment of **\$45.00** to all REALTOR® members. **The entire amount of this assessment qualifies as deductible dues.**



APPLICATION FOR REALTOR® MEMBERSHIP*

I hereby apply for REALTOR®/Designated REALTOR® (Primary or Secondary) membership in the Catawba Valley Association of Realtors®, and remit my payment in the amount of \$ **500.00**, for an *application fee, plus \$ _____ (the dues portion found on page 2). In the event my application is approved, 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, Rules and Regulations, of the Catawba Valley Association of Realtors®, the State Association, and the National Association, and if required, I further agree to satisfactorily complete a reasonable and non-discriminatory written examination on such Code, Constitutions, Bylaws and Rules and Regulations. I understand membership brings certain privileges and obligations that require compliance. Membership is final only upon approval by the Board of Directors and may be revoked should completion of requirements, such as orientation, not be completed within time frame established in the Association's Bylaws. I understand that I will be required to complete periodic Code of Ethics training as specified in the Association's bylaws as a continued condition of membership. (See attached dues schedule)

NOTE: Applicant acknowledges that if accepted as a member and he/she subsequently resigns from the Association or otherwise causes membership to terminate with an ethics complaint pending, the Board of Directors may condition renewal of membership upon applicant's certification that he/she will submit to the pending ethics proceeding and will abide by the decision of the hearing panel. If applicant resigns or otherwise causes membership to terminate, the duty to submit to arbitration continues in effect even after membership lapses or is terminated, provided the dispute arose when applicant was a REALTOR®.

***Applications are processed within hours of receipt. If for any reason you withdraw your membership, a portion of the application fee is refundable, provided you notify the board office within the first 72 hours of membership. Any request made beyond the initial 72 hours cannot be considered.**

SECTION I

Type: Realtor or Designated Realtor Membership: Primary or Secondary

Check One: Mr. Mrs. Ms. Gender: Male Female Preferred Pronoun(s) _____

Full Name (print): _____ Nickname: _____ (i.e. Richard = Rick)
First, Middle Initial, Last

Real Estate License #: _____ Broker Provisional Broker (Check One)

Licensed/certified appraiser: Yes No Appraisal License #: _____

Residence Address: _____

Preferred Phone #: _____ Additional Phones: (Home, Pager, Cellular, V. M., etc) _____

E-mail: _____ Web Address: _____

Birth date: _____ Designations (ex. GRI): _____

Office Name: _____

Office Address: _____

Office Phone: _____ Office Fax: _____

Other Languages Spoken: _____

Have you ever served in the military? _____ Branch: _____

Are you presently a member of any other Association of REALTORS®? Yes No
 If yes, name of Association and type of membership held: _____

Have you previously held membership in any other Association of REALTORS®? Yes No
 If yes, name of Association and type of membership held: _____

Have you been found in violation of the Code of Ethics or other membership duties in any Association of REALTORS® in the past three (3) years or are there any such complaint pending? Yes No (If yes, provide details as an attachment)

If you are now or have ever been a REALTOR®, indicate your NAR membership (NRDS) #: _____

and last date (year) of completion of NAR's Code of Ethics training requirement: _____

Have you ever been refused membership in any other Association of REALTORS®? Yes No
If yes, state the basis for each such refusal and detail the circumstances related thereto: _____

Do you hold, or have you ever held, a real estate license in any other state? Yes No
If so, where: _____

Have you been found in violation of state real estate licensing regulations within the last three years? If yes, provide details: _____

Have you been convicted, adjudged, or otherwise recorded as guilty by a final judgment of any court of competent jurisdiction of a felony or other crime? If yes, provide details: _____

***Are you a principal, partner, corporate officer or branch office manager? Yes No**
If yes, you must also complete Section II 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. **NOTE:** Payments to the Catawba Valley Association of REALTORS® are not deductible as charitable contributions. Such payments may, however, be deductible as an ordinary and necessary business expense. No refunds.

By signing below I consent that the REALTOR® Associations (local, state, national) and their subsidiaries, if any (e.g., MLS, Foundation) may contact me at the specified address, telephone numbers, fax numbers, email address or other means of communication available. This consent applies to changes in contact information that may be provided by me to the Association(s) in the future. This consent recognizes that certain state and federal laws may place limits on communications that I am waiving to receive all communications as part of my membership.

Signature: _____ Date: _____

***SECTION II - DESIGNATED REALTORS®**

Company information: Sole Proprietor Partnership Corporation LLC (Limited Liability Company)

Your position: Principal Partner Corporate Officer Branch Office Manager

Names of other Partners/Officers/ of your firm: _____

Is the Office Address, as stated, your principal place of business? Yes No
If not, or if you have any branch offices, please indicate and give address: _____

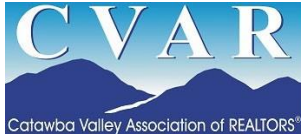
Have you or your firm been found in violation of state real estate licensing regulations within the last three years? If yes, provide details: _____

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. If yes, provide details: _____

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 Board, I shall pay the fees and dues as from time to time established. **NOTE:** Payments to the Catawba Valley Association of REALTORS® are not deductible as charitable contributions. Such payments may, however, be deductible as an ordinary and necessary business expense. No refunds.

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Signature: _____ Date: _____



Catawba Valley Association of REALTORS®

**361 2nd St NW
Hickory, NC 28601
Phone: 828-322-8249**

DEBIT/CREDIT CARD CHARGE AUTHORIZATION FORM

If you would like to have your invoices automatically charged to your card please fill out and return this form to rebecca@catawbavalleyrealtors.com . You will be sent a receipt so you will have a copy for your records.

All personal data information is encrypted and protected by Secure Sockets Layer (SSL).

This is to authorize the Catawba Valley Association of REALTORS® to charge my invoices to a credit/debit card for the following dues and fees.

Please check all that are applicable:

- Annual Association dues
- New Member Application Fee (never pro-rated)
- New Member Association Dues (if joining after January, dues are pro-rated)
- Transfer fee

Card type: **PLEASE INDICATE WHICH TYPE OF CARD YOU ARE USING**

Personal Corporate

Visa MasterCard

Card Number: _____ - _____ - _____ - _____

Expiration Date: ____/____

Member Name _____ NCREC # _____

Name on Card _____

Billing Address for Card _____

Signature _____ Date _____

