

2018 SECONDARY REALTOR® MEMBERSHIP PACKAGE

- NEW SECONDARY MEMBER** **RENEWAL SECONDARY MEMBERSHIP**

Secondary REALTOR® Membership: For a REALTOR® who has already joined another Association as a primary member and would like to join RCAOC as a secondary member. There need not be a Designated REALTOR® member of RCAOC for licensees to select RCAOC as their secondary Association. Secondary membership applications must provide with their application a “MEMBER IN GOOD STANDING LETTER” from their primary board/association.

- 1) NAR (NRDS) MEMBER ID # _____
- 2) Name (as appears on license) _____
- 3) E-Mail Address: _____
- 4) Office Name: _____
Office Street Address: _____
City/State/Zip: _____
- 5) Office Phone Number: _____
- 6) Cell/Mobile Number: _____ Date of Birth (MM/DD/YY) _____
Home Address (St. or P.O.B.) _____
City/State/Zip: _____ Home Ph Number: _____
- 7) Which address do you use for primary mailing? **Office** **Home/P.O.B.**
- 8) Professional Designations: **CCIM** **CIPS** **CRS** **CRBE** **IREM** **RLI** **SIOR** **Other** _____
- 9) Primary Specialties:
 Commercial/Industrial Brokerage **Property Management**
 Residential Brokerage **Appraisals**
 Farm and Land Brokerage **Mortgage Financing**
 Building and Development **Leasing- Tenant/Landlord**
 Other: _____
- 10) Please list Boards/Associations of REALTORS® to which you currently belong: _____

Please list Boards/Associations of REALTORS® to which you previously belonged: _____

- 11) **“LETTER OF GOOD STANDING” from primary board/association must be included with this application.**

GENERAL TERMS AND CONDITIONS OF MEMBERSHIP

1. **Bylaws, policies and rules.** I agree to abide by the Bylaws, policies and rules of the REALTORS® Commercial Alliance of Orange County, the Bylaws, policies and rules of the California Association of REALTORS®, and the constitution, Bylaws, policies and rules of the National Association of REALTORS®, all as may from time to time be amended.
2. **Orientation.** I understand that if the Board/Association requires orientation, I must attend such orientation prior to becoming a member of the Board/Association.
3. **No refund.** I understand that my Board/Association membership dues are non-refundable. In the event I fail to maintain eligibility for membership for any reason, I understand I will not be entitled to a refund of my dues or fees.
5. **Authorization to release and use information; waiver.** I authorize the Board/Association or its representatives to verify any information provided by me in this application by any method including contacting the California Department of Real Estate, my current or past responsible broker or designated REALTOR®, or any Board/Association where I held, or continue to hold, any type of membership. I further authorize any Board/Association where I held, continue to hold, any type of membership to release all my membership or disciplinary records to this Board/Association, including information regarding (i) all final findings of Code of Ethics violations or other membership duties within the past three (3) years; (ii) pending ethics complaints (or hearings); (iii) unsatisfied discipline pending; (iv) pending arbitration requests (or hearings); and (v) unpaid arbitration awards or unpaid financial obligations. I understand that any information gathered under this authorization may be used in evaluating my application for membership and future disciplinary sanctions. I waive any legal claim or cause of action against the Board/Association, its agents, employees or members including, but not limited to, slander, libel or defamation of character, that may arise from any action taken to verify, evaluate or process this application or other use of the information authorized and released hereunder.
6. By signing below, I expressly authorize the Board/Association, including the local, state and national, or their subsidiaries or representatives to fax, e-mail, telephone or send by U.S. mail to me, at the fax numbers, e-mail, telephones and addresses above, material advertising the availability of or quality of any property, goods or services offered, endorsed or promoted by the Board/Association.

**PAYMENT INFORMATION – REALTORS® COMMERCIAL ALLIANCE OF ORANGE COUNTY (RCAOC)
2018 Secondary Membership Dues**

Keep a copy of the entire document for your records

Secondary Membership Dues

\$100.00*

*Credit/Debit Cards Please Add \$4.00 to the above amount

- 1) Complete Application in Full
- 2) Attach "Letter of Good Standing" from primary board/association
- 3) Checks are payable to: **REALTORS® COMMERCIAL ALLIANCE OF ORANGE COUNTY or RCAOC** Check # _____
- 4) If made with company check; pls. list company name: _____
- 5) Credit Card/Debit Card Payments: Scan and email to: rcaoc.ae@gmail.com

Mailing Address: RCAOC PO Box 17921 Anaheim Hills, CA 92817-7921

Credit/Debit Card # _____ CCV _____ Expiration Date _____

Name on Card _____ Billing Zip _____ (circle one) VISA MC AMEX

Signature _____ Date _____

By signing you are authorizing RCAOC to process your payment and agree to information provided in Secondary Application. All dues are non-refundable.

RCAOC thanks you in advance for your membership.

May 2018 be a very successful year for you and best wishes for wealth, health and happiness!

RCAOC

REALTORS® Commercial Alliance of Orange County

P.O. Box 17921, Anaheim Hills, CA 92817-7921 • www.RCAOC.org • rcaoc.ae.roxie@gmail.com • (714) 432-1830

Letter of Good Standing Form

Member Name: _____
(First Name) (Last Name)

NRDS Member Number: _____

Above person is a member in good standing of the: _____
(Your current Board/Association)

2017 REALTOR (both C.A.R. and N.A.R.) dues: have been paid have not been paid

The RCAOC is requesting minimum "core" information including:

- a) *All final findings of Code of Ethics violations and violations of other membership duties with the past three (3) years; please explain: _____
- b) *Does member have pending complaints alleging violations of Code of Ethics or alleging violations of other membership duties;
YES NO
- c) *Does member have incomplete or (pending) disciplinary measures;
YES NO
- d) *Does member have pending arbitration requests (or hearings);
YES NO
- e) *Does member have unpaid arbitration awards or unpaid financial obligations to the Assoc. or it's MLS; YES NO
- f) Does the member pay their dues to the Assoc. or it's MLS on an installment plan; YES NO
- g) If so, are the member's dues current YES NO
- h) When is the next installment due date _____

* "YES" to (a-e) a required detailed written explanation to be attached.

Verified By: _____ Title: _____

Print Name: _____ Date: _____

Phone _____ Email: _____

Authorized Signature: _____ for Association: _____

Please be advised that all applicants **must** submit this completed form in order to join RCAOC.

Questions may be directed to rcaoc.ae@gmail.com