



Monmouth Ocean Regional REALTORS®
4000 Rt. 66, One Hovchild Plaza, Suite 210, Tinton Falls, NJ 07753
Phone: 732-918-1340 * www.MORR.realtor

APPLICATION FOR ASSOCIATION MEMBERSHIP

I hereby apply for Associate Membership in the Monmouth Ocean Regional REALTORS®. I agree to abide by the Association's Constitution, By-Laws, Rules & Regulations, and the Code of ETHICS of the National Association of REALTORS® and Multiple Listing Rules if applicable. I hereby irrevocably waive any claims against the Association or any of its Officers, Directors or Members for any act in connection with the business of the Association and particularly as to its or their acts in electing or failure to elect, advancing, suspending, expelling or otherwise disciplining me as an applicant or as a member.

NAME: _____

RESIDENCE ADDRESS: _____

(STREET)

(CITY AND STATE)

(ZIP)

CELL PHONE: _____ EMAIL ADDRESS: _____

NJ REAL ESTATE LICENSE NO. _____ () Broker () Salesperson

NAME OF AGENCY: _____

ADDRESS (Main or Branch Office where you will be working):

(STREET) (CITY AND STATE) (ZIP)

I agree to pay the fees presently established as long as I am a member of this Association.

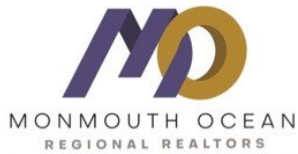
DATE

APPLICANT SIGNATURE

I am the employing Licensed Real Estate Broker of the above applicant. I certify that he/she will be fully trained and familiarized with the Real Estate License Act and the By-Laws of the Monmouth Ocean Regional REALTORS® and its Multiple Listing Rules if applicable, prior to being permitted to show, list or sell property of any kind. To the best of my knowledge, based upon a thorough knowledge of the applicant's background, I believe that he/she will make a proper representative of my office and of this Association. I certify that all statements in this application are true to the best of my knowledge and that no material fact has been omitted or concealed.

DATE

EMPLOYING BROKER



Payment Information & Check List

Please include with your application

- Completed applications with SIGNATURES***

- Letter of Good Standing (if applicable)***

- Acceptable form of payment: Check or Credit Card***

Please make checks payable to Monmouth Ocean Regional REALTORS®

Credit Card Information: ___ VISA ___ MC ___ AMEX ___ DISC

Name _____

Card # _____ Exp. Date: _____

Amount Paid: \$_____

Signature: _____

NOTE: All necessary paperwork (*with signatures*) along with your payment, must be submitted together.

The omission of any documentation WILL delay the processing of your application.
