



## New Member Application Checklist:

Thank you for your interest in joining the Chicago Association of REALTORS® (C.A.R.).

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 copy of your license or 45 day permit sponsor card.
- For new offices (Managing Brokers, Appraisers or Affiliates), a copy of your firm's license (if applicable) and/or DBA.
- 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 fees. If you are mailing a check, please do not fax your application as it will not be processed until we receive your check. If you are faxing your application with a Visa, MasterCard, American Express, or Discover number, please do not also mail your application as it will not be necessary.

Your application should be processed within two to three business days of receipt. Once it has been processed, we will contact you with your Member ID number.

We look forward to welcoming you as a new member of C.A.R.

430 N. Michigan Ave. 8th Floor Chicago, IL. 60611  
Monday–Friday, from 8:30 a.m. - 5 p.m.

6017 W. 26<sup>th</sup> St. Cicero, IL 60804  
Tuesdays and Thursdays, from 9 a.m. to Noon  
and 1 p.m. to 4 p.m. on both days.

Phone: (312) 803-4900



# New Member Application

I hereby submit the required initial fee and apply for membership in the Chicago Association of REALTORS®.

RPAC	\$20.00	(Optional)	
CAREF	\$20.00	(Optional)	
REEF	\$5.00	(Optional)	
Local Dues	\$153.45	Check One:	<input type="checkbox"/> Secondary Broker
State Dues	\$216.67	(Optional)	<input type="checkbox"/> Broker Owner
National Dues			<input type="checkbox"/> Broker
Application Fee			<input type="checkbox"/> Appraiser
MRED Fees	\$179.70	<b>Mar.'17 – Sept.'17</b>	<input type="checkbox"/> Leasing Agent
<b>Total Due</b>	<b>\$ 594.82</b>		

**Please call (312) 803-4900 for current dues pro-ration.** Annual dues for each year are due by October 1 of the preceding year. **Application cannot be processed without payment in full.** Fees are pro-rated on a monthly basis.

Do you currently hold secondary membership in another REALTOR® Association \_\_\_\_\_ YES \_\_\_\_\_ NO

If yes, please identify your primary Association \_\_\_\_\_

**Type / Print Name** as shown on your License \_\_\_\_\_ Ms. \_\_\_\_\_ Mrs. \_\_\_\_\_ Mr. \_\_\_\_\_

Soc. Sec. #: \_\_\_\_\_ R.E. License #: \_\_\_\_\_

Residence Address: \_\_\_\_\_  
(Street) (City) (ZIP)

Home Phone: (\_\_\_\_) \_\_\_\_\_ Home Fax: (\_\_\_\_) \_\_\_\_\_

Phone number you would like to have included on the MLS: (\_\_\_\_) \_\_\_\_\_

Prefer to receive mail at \_\_\_\_\_ Office OR \_\_\_\_\_ Home

E-Mail: \_\_\_\_\_ Web Address: \_\_\_\_\_

Firm Name: \_\_\_\_\_ Firm MLS Office ID# \_\_\_\_\_

Firm Address: \_\_\_\_\_  
(Street) (City) (ZIP)

Firm Phone: (\_\_\_\_) \_\_\_\_\_ Firm Fax: (\_\_\_\_) \_\_\_\_\_

Check your specialties:  Appraisal  Auction  Buyer Broker  Commercial  Development  Industrial  Office  International  Investment  
 Leasing  Property Management  Rehabs  Residential  Retail  Multi-Family  Other \_\_\_\_\_

Do you want to receive the weekly **CommercialForum** E-newsletter? Yes \_\_\_\_\_ No \_\_\_\_\_

Did you take your pre-licensing course with the REALTORS® Real Estate School within the past 12 months? Yes \_\_\_\_\_ No \_\_\_\_\_

REALTOR® Designations: \_\_\_\_\_

Professional designations: \_\_\_\_\_

Other Professional/Trade Association Memberships: \_\_\_\_\_

Civic, charitable, community or political involvement: \_\_\_\_\_

Are you interested in serving on C.A.R.'s political contact team for your Alderman/legislator? \_\_\_\_\_ If yes, please provide their name and note any affiliation you have with him/her: \_\_\_\_\_

Additional Languages Spoken: \_\_\_\_\_

(Over please. Both pages MUST be fully completed.)

Have you held membership in any other local REALTOR® Board? No \_\_\_\_\_ Yes \_\_\_\_\_

If yes, where: \_\_\_\_\_ When did you start at this board?: \_\_\_\_\_

When did you leave?: \_\_\_\_\_ What was your MLS ID number? \_\_\_\_\_

In the event of my election to membership, I agree to abide by the By-laws of the Chicago Association of REALTORS® and the code of Ethics of the National Association of REALTORS®. Upon the expiration of said membership for any cause, I will discontinue to use the designation "REALTOR®" and return to the Association all certificates, signs, seals or other indications of membership in the Association and any items which are the property of the Association.

I further certify that in signing this application all answers given on this application are true and correct and I authorize said Board through its representatives to make such investigation as may be considered advisable to verify the statements herein made by me. I give the Association permission to communicate with me via phone, email, and/or fax.

I agree to pay the established fees as are due and payable as long as I remain a member of this Association. **I understand that I am paying for pro-rated dues for the fiscal year 10/1 through 9/30.** I acknowledge that I will receive an invoice every August for the next fiscal year's annual dues. I understand that my dues payment is due IN C.A.R. OFFICES no later than 10/1. I understand that RPAC and C.A.R. Foundation amounts are voluntary. **I understand that all dues and fees paid to the association are non-refundable.**

I agree to attend an Orientation program as a prerequisite to my consideration for membership. Furthermore, **I agree to complete the orientation course and be installed as a member within a three-month period from the date of this application. Otherwise, I understand that all monies paid to the Association by me will be kept by the Association as its process fee and that it will be necessary for me to re-apply for membership, which will include the additional payout of all fees and costs.** I also agree to volunteer one additional hour toward an Association focus group.

I hereby authorize the Association to bill me MRED access charges, and I agree to pay MRED payments fully and punctually if I am joining a MRED office. I understand that if the monies are not received by the Association by the invoice due date, my MRED access will be suspended and that I will be required to pay a reactivation fee along with past due amount to have my MRED access re-activated.

**I understand my office must be in compliance with all local zoning ordinances and homeowner and/or condominium association rules, regulations, and policies.**

**RPAC DONATIONS:** The REALTORS® Political Action Committee (RPAC) is a non-profit, non-partisan organization whose purpose is to provide financial assistance to the election campaigns of qualified candidates.

The PAC receives voluntary contributions from REALTORS®, REALTOR® ASSOCIATES and others interested in the rights of private property ownership. The record, program and quality of candidate determine who gets PAC support. Its primary role is to support local elected officials/candidates.

Payments or contributions to Chicago Association of REALTORS®, the Illinois Association of REALTORS® and RPAC either state or federal, are not deductible as charitable contributions for federal income tax purposes. Local, state and national dues may be deductible as a business expense. Contributions to RPAC are voluntary and the amount listed for RPAC is merely a suggestion.

**C.A.R. FOUNDATION DONATIONS:** A 501(c)3 charitable organization, we are the education, philanthropic and research arm of the Chicago Association of REALTORS® Provide REALTORS® with opportunities to enhance their business through education; foster careers in real estate, and champion the professional image of the Chicago REALTOR®.

**REEF – THE REAL ESTATE EDUCATION FUND:** REEF is a fund established by the Illinois Association of REALTORS® to provide education dollars to you and REALTORS® across the state. IAR requests you consider making your contribution.

## REALTOR® Association Communication Consent

I understand that by providing my mailing address(es), email address(es), telephone number(s), and FAX number(s), I consent to receive communications sent from the Chicago Association of REALTORS®, the Illinois Association of REALTORS®, and the National Association of REALTORS® via U.S. mail, e-mail, telephone, or facsimile at those number(s)/location(s) listed above.

Required Signature: \_\_\_\_\_  
(Applicant)

Date: \_\_\_\_\_

I hereby certify that the named applicant for membership is an employee or associate actively engaged in real estate within my office; that I believe said applicant is honest, trustful and of good reputation, and I recommend that the named Board elect said applicant to membership.

Required Signature: \_\_\_\_\_  
(Sponsoring Broker/Owner)

Date: \_\_\_\_\_

*(Over please. Both pages MUST be fully completed.)*

By default, agents are giving the following rights within ConnectMLS. Should you wish to disallow any of the following options, please check off the box and those checked will **NOT** be given to the agent. Rights can be updated in the future by sending an email request from the Broker to membership@chicagorealtor.com.

- |   |   |
|---|---|
| <input type="checkbox"/> Use custom reports         | <input type="checkbox"/> Search tax records   |
| <input type="checkbox"/> Hotsheets                  | <input type="checkbox"/> Enable advanced AMS search                                   |
| <input type="checkbox"/> Open house/tours search    | <input type="checkbox"/> Add/Edit own listings  |
| <input type="checkbox"/> Search off-market listings | <input type="checkbox"/> Search active listings (requires search off-market listings) |
| <input type="checkbox"/> Use the financial tools    | <input type="checkbox"/> E-mail listings/prospecting                                  |

**Above data MUST be fully completed on both pages.**

*Please be sure you are paying the current dues pro-ration. Application cannot be processed without payment in full.*

C.A.R. accepts check, money order, Visa, MasterCard, American Express, and Discover. If paying with Visa / MasterCard / American Express / Discover, please complete the following:

Circle one: **Visa** / **MasterCard** / **American Express** / **Discover**

Number:     -     -     -

Expires: \_\_\_\_\_ Authorized Signature: \_\_\_\_\_