



3323 Northwest Ave., Bellingham, WA 98225  
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### APPLICATION FOR REALTOR® MEMBERSHIP

Name: \_\_\_\_\_

Application Type:  New Broker  Reinstatement \_\_\_\_\_ (Last year of active membership)

A broker may apply for either:

- a) **Primary Membership** - Your REALTOR® membership resides with the Whatcom County Association of REALTORS®; education, national, state, and local dues are invoiced by the Whatcom County Association.
- b) **Secondary Membership** - Your REALTOR® Membership resides with an Association other than Whatcom County but you are choosing to join the Whatcom County Association as a supplement to your primary REALTOR® Membership; Whatcom County Association will only invoice you for the Whatcom County Association local dues and State dues, if your Primary membership is not in Washington.

I am applying for:  Primary Membership  Secondary Membership

I hereby apply for REALTOR® Membership in the Whatcom County Association of REALTORS®.

**Membership Obligations:** I understand that membership in the REALTOR® organization includes certain obligations to which I agree to abide including:

- a) Abiding to the Code of Ethics of the National Association of REALTORS®, which includes the duty to arbitrate (or to mediate if required by the Association) and the Constitution, Bylaws and Rules and Regulations of the Whatcom County Association, the Washington Association, and the National Association of REALTORS®.
- b) Completion of the Initial Code of Ethics course and subsequent Code of Ethics courses every three years.
- c) Completion of the New Member Orientation course within the first year of membership.

**REALTOR® Trademark:** My membership grants me a license to use the REALTOR® trademarks. I agree to adhere to the rules governing use of those trademarks as required under rules proclaimed by the National Association of REALTORS®. Termination of my membership in the Association, for any reason is an automatic revocation of the right to use the term REALTOR® and I will immediately discontinue use of the term REALTOR® and all REALTOR® trademarks.

**Ethics Complaint:** I acknowledge that if I resign from the Association or otherwise terminate my membership with an ethics complaint pending, the Association's Board of Directors may condition renewal of my membership on my submission to the pending ethics proceeding and will abide by the hearing panel's decision. I also agree to submit to arbitration after membership lapses or is terminated provided the dispute arose while I was a member of the Association and a REALTOR®.

I hereby submit the following information for consideration of my application.  
(If additional detail is needed, please include separate documentation)

## **1. Your Personal Information**

First Name: \_\_\_\_\_ Middle: \_\_\_\_\_

Last Name: \_\_\_\_\_

Suffix Jr., Sr., III, Other (Please Indicate \_\_\_\_\_) Date of Birth (MM/DD/YYYY) \_\_\_\_/\_\_\_\_/\_\_\_\_\_

Nickname (DBA): \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

I agree to receive WCAR text alerts to the above cell phone number.

Primary E-mail: \_\_\_\_\_

Secondary E-mail: \_\_\_\_\_

Your Broker License Number: \_\_\_\_\_

Date your License was issued (MM/DD/YYYY): \_\_\_\_/\_\_\_\_/\_\_\_\_

Do you hold, or have you ever held, a Real Estate license in any other state? Yes No If so, please provide the license number and state where the license is/was issued:  
\_\_\_\_\_

## **2. Brokerage Information**

Your Brokerage Office Name: \_\_\_\_\_

Your Brokerage Office Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Office Phone: \_\_\_\_\_ Office Fax: \_\_\_\_\_

### **3. Preferred Mailing/Contact Information**

Preferred Phone:  Home,  Office,  Cell

Preferred E-mail:  Primary E-mail  Secondary E-mail

Preferred Mailing:  Home  Office

Mail Publications to:  Home  Office

If you selected "Office" above for mailings, please provide your office's mailing address:

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

If you wish to have Association mail sent to an address other than your home, please provide the address:

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

If you are now or have been a REALTOR® member before, please provide the following information:

Previous NAR Membership (NRDS) No.: \_\_\_\_\_

Name of Prior Association: \_\_\_\_\_

Date of your last NAR Code of Ethics training: \_\_\_\_\_

Are you currently a member of any other Association of REALTORS®?  Yes  No

If yes, name of the Association: \_\_\_\_\_

Type of Membership held: \_\_\_\_\_

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 ground 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 Association of REALTORS® are not tax deductible as charitable contributions. Such payment 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: \_\_\_\_\_

#### **4. Application Fees and Dues**

##### **2026 REALTORS® Dues Payment (NAR, WR, WCAR)**

Enclosed is payment in the amount of \$ 150 for my New Member/Reinstatement fee and \$ \_\_\_\_\_ (see table below) for my prorated membership dues payable directly to the Whatcom County Association of REALTORS®. I understand that my dues will be returned to me in the event of non-election, **but that the application fee is non-refundable.**

**For New REALTORS®** - In addition to the \$150 New Member fee, your dues are prorated. Please add the amount indicated for the month you initially hung your license with your new brokerage

Jan- \$793.00; Feb- \$ 733.59; Mar- \$ 674.16; Apr- \$ 614.75; May- \$555.34; June- \$495.91

July- \$436.50; Aug- \$377.09; Sept- \$317.66; Oct- \$258.25; Nov- \$198.84; Dec- \$139.41

**Example: If you hung your license in March, the total due would be \$150 (New member fee) + \$674.16(Dues) = \$824.16.**

**\*\*Transfer of REALTOR® Membership:** REALTORS® who paid their current year dues at another Association of REALTORS® and have attached a Letter of Good Standing to this application, will qualify for reduced dues. The amount is based on dues paid to National and Washington State REALTORS®. Please contact WCAR for the amount.

#### **5. Options To Pay Your Initial Dues (please check one)**

**NAR Online Profile (recommended):**

If you are a NEW member, the Association will create a profile for you in the National REALTOR® Database System (NRDS). That system will generate an invoice for your New Member dues. If you want to pay dues through this system, please follow these steps:

- 1) Submit your New Member Application to the Association;**
- 2) When you receive your NRDS number, go to [www.nar.realtor](http://www.nar.realtor) and "Sign In;" (top right-hand corner)**
- 3) You will be asked to create your profile and set a new password;**
- 4) Click on the "Pay Dues" tab – Only Mastercard, Visa, and Apple Pay are accepted. There is no processing fee.**

**QuickBooks Online Link:** For debit/credit card processing, sent via email. Please see processing fees below. This will be sent to the primary contact unless otherwise noted.

- 2.99% processing fee for Visa, Mastercard, American Express, Discover, PayPal, Apple Pay and Venmo
- 1% processing fee for EFT - Electronic Bank Transfers

**Check:**

Please mail to:

Whatcom County Association of REALTORS®  
3323 Northwest Ave  
Bellingham, WA 98225

Notes: \_\_\_\_\_

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