Kingman/Golden Valley Association of REALTORS®/WARDEX

Phone: (928) 692-3222



BROKER APPLICATION DATA SHEET

ALL INFORMATION IS REQUIRED - PLEASE PRINT LEGIBLY

Name:	T	Today's Date:			
Name: AS SHOWN ON REAL ESTATE LICENSE		·			
Date of Birth:	Gender:	☐ Male	☐ Female		
Mailing Address:					
Home Phone:	Cell Phor	ne:			
Main Phone # (to appear on listings):					
Email Address:					
RE License Number:	NRDS Number:				
Do you currently or have you EVER belonged	to another	☐ Yes	□No		
Association? If yes, where?			Current Member		
Do you wish Kingman/Golden Valley Associat be your PRIMARY Association?	ion of REALTORS® to	☐ Yes	□No		
If Secondary, name of Primary Association: _					
WARDEX & SUPRA					
User Name (up to 8 characters):	P	asswora.	orary password will be given ou a temporary password when		
SUPRA eKey 4 digit pin:	<u> </u>	you turn in you	or a temporary password when ir paperwork. The first time you ll be prompted to update your		
FIRM/OFFICE INFORMATION			password)		
Firm Address:					
Office Phone:					
Office Phone:					
Date Hired by Firm:	Office Fa	nx:			

NOTE: ONCE ALL REQUIRED SIGNATURES HAVE BEEN OBTAINED, PLEASE SUBMIT TO KGVAR

Kingman/Golden Valley Association of REALTORS®/WARDEX

KINGMAN | GOLDEN VALLEY ASSOCIATION OF REALTORS

Phone: (928) 692-3222

APPLICATION FOR ASSOCIATION MEMBERSHIP AS PRINCIPAL, PARTNER, CORPORATE OFFICER OR BRANCH OFFICE MANAGER

ALL INFORMATION IS REQUIRED – PLEASE PRINT LEGIBLY

SECTION I

Applicants for Membership as principals, partners, corporate officers, or branch office managers are required to complete all Sections below.

To: KINGMAN/GOLDEN VALLEY ASSOCIATION OF REALTORS®

(Applicant's Name – Please I	<u>Print</u>)
Provide all addresses a	and phone numbers. Check boxes for primary contacts:
☐ Mailing Address:	
☐ Home Phone:	Cell Phone:
Office Address:	
Office Phone:	
KGVAR), and enclose my chevent my application is approto otherwise, and on my of REALTORS® including the Association of REALTORS Code, constitution, bylaws, a continuing commitment to altime to time amended. Fina information and comment abore events and the comment abore events are events.	DR® Primary or Secondary Membership in the Kingman/Golden Valley Association of REALTORS® (hereinafted beck for \$ which I understand will be returned to me in the event I am not accepted for Membership. In the loved, I agree as a condition to Membership to complete the New Member Orientation course of the KGVAR I also agree own initiative, thoroughly familiarize myself with the Code of Ethics of the NATIONAL ASSOCIATION OF duty to arbitrate business disputes in accordance with the Code of Ethics and Arbitration Manual of the Arizona and the Bylaws, and Policy Statements of the KGVAR, the Arizona Association of REALTORS®, and the Nationa B. I further agree to complete satisfactorily a reasonable and nondiscriminatory written examination covering such that the agree that my act of paying dues shall evidence my initial and olde by the aforementioned Code of Ethics, constitution, bylaws, rules and regulations, and duty to arbitrate, all as from ally, I consent and authorize the KGVAR, through its Member Services Committee or otherwise, to invite and receive that me from any Member or other person, and I agree that any information and comment furnished to the Association by the nation of character.

NOTE: Applicant acknowledges that the Association will maintain a Membership file of information, which will be shared with WARDEX and may be shared with other Boards/Associations where the applicant subsequently seeks Membership. This file shall include: previous applications for Membership; all final findings of Code of Ethics violations of other Membership duties within the past three (3) years; pending complaints alleging violations of the Code of Ethics or alleging violations of other Membership duties; incomplete or pending disciplinary measures; pending arbitration requests; and information related to unpaid arbitration awards or unpaid financial obligations to the Association or WARDEX.

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 while applicant was a REALTOR®.

NOTE: Dues payments to the Association are not tax deductible as charitable contributions. Portions of such payments may be tax deductible as ordinary and necessary business expenses.

SECTION I (cont.)

I hereby submit the following information for consideration: Name (AS SHOWN ON REAL ESTATE LICENSE): (Please Print) Nickname: RE License Number: State: License Type: Broker Salesperson Other Name of Firm/Office: Firm/Office Address: E-mail Address: Website: I agree that, if accepted for Membership in the Association, I will pay the fees and dues as established. Applicant's Signature: Date: **SECTION II** This section must be completed by applicants for Membership, whether Primary or Secondary, who are principals, partners, corporate officers, or branch office managers (i.e. individuals in positions of management control) Is the office address specified in Section I your principal place of business? Yes No If no, please provide address of principal place of business:

SECTION II (cont.)

List the names and addresses corporate officer:	of all branch off	ices or other real estat	e firms in which yo	u are a principal, partner, an	d/or
Name:					
Address:				-	
Name:					
Address:					
Are you currently a Member ASSOCIATION OF REALT past 3 years)?					the
	Yes	No			
If "yes", please list each Boardates of Membership.	rd and Association	n where Membership v	was held, type of Mo	embership held, and approxin	nate

SECTION II (cont.)

Association affiliated with the NATIONAL ASSOCIATION OF REALTORS®? Yes No If "yes", please list the name of each MLS. Have you ever previously held a Real Estate license? Yes □ No No Has your Real Estate license, in this or any other state, been suspended or revoked? Yes If "yes," please specify the place(s) and date(s) of such action, and detail, the circumstances relating thereto (attach separate sheet if necessary): Are there now, or have there been within the past 3 years, any pending or unresolved complaints, any complaints against you or the firm with which you have been associated before any state Real Estate regulatory agency or any other agency of government?? ☐ Yes \square No If "yes", specify the substance of each complaint in each state, the agency before which the complaint was made, and the current status or resolution of such complaint, (attach separate sheet if necessary): Have you ever been convicted of a felony? T Yes \square No If "yes", please give details including state and court of conviction (attach separate sheet if necessary):

Are you a current member of a multiple listing service (MLS), which is owned and operated by a Board or

SECTION II (cont.)

and accurate information as requested, or any misstatement of fact, may be grounds for revocation of my Membership, if granted. Applicant's Signature: **SECTION III** Information supplied will assist the Association in establishing historical data regarding its Members. Information furnished under Section III is voluntary and will not be used in evaluating an applicant's qualifications for Membership. Date of birth: (mm/dd/yyyy) Highest level of education completed: First entered the Real Estate business on _______, at ____ (Date) (State) Have you been engaged continuously in the Real Estate business since then? ☐ Yes If not, during what years were you in the Real Estate business? How many years have you been active in the Real Estate profession? _____ Salesperson _____ Broker Other In what area(s) of Real Estate do you specialize?): In what other business(es) have you been engaged? _____ from _____ to _____, at _____ _____ from _____ to _____, at ____ ______ from ______ to ______, at _______(City, State) , and continuously licensed since First licensed in Arizona on (Month, Year) (Month, Year) Resident in area since: Previous Residence: (City, State) List the names of committee(s) on which you would be interested in serving (e.g., Governmental Affairs, Education, Member Services, Affiliates, Community Outreach, etc.):

I hereby certify that the foregoing information furnished is true and correct, and I agree that failure to provide complete

SECTION III (cont.) Yes Are you now employed by or engaged in any other business or profession? ☐ No If "yes", please list: (Position and Location) Are you now a Member of, or have you ever been a member of, a Real Estate Board or Association not affiliated with the NATIONAL ASSOCIATION OF REALTORS®? □ No Yes If "yes", please list the name of each such Board or Association, the type of Membership held, and the dates establishing the period during which membership have been held:

^{*}Adopted by Board of Directors—April 1985

^{*}Amended by Board of Directors—February 1991

^{*}Amended by Board of Directors—November 1993 *Amended by Board of Directors—May 1999

^{*}Amended by KGVAR—December 2007

^{*}Amended by KGVAR—September 2016 *Amended by KGVAR—June 2020

WARDEX New User Activation



Member Association: BULLHEAD CITY KINGMAN MLS ONLY

NON-MEMBER ASSOCIATION _____

Member Name:	
Member Type:	
Firm Name:	
Firm Address:	
User E-Mail Address:	
Cell Phone:	Preferred Log in
Office Phone:	Office Fax:
Listing Privileges (Realtors only) Y/N:	If N Broker Signature is Required:
Agent/Broker License Number:	
Firm License Number:	
	STAFF use only
Received Date:	STAFF initials
Assign: Login ID:	Password:

Please email to office@kgvar.com

Rev. 06/23 WARDEX

Western Arizona REALTOR® Data Exchange (WARDEX)

Service Participation Agreement (rev.11-20-2020)

I,, Designated REALTOR®/Broker of the Real Estate Firm
, Designated REALTON & Bloker of the Real Estate Firm
WESTERN ARIZONA REALTOR® DATA EXCHANGE (hereinafter referred to as WARDEX or "SERVICE") BUSINESS NAME CHANGES REQUIRE A NEW SERVICE PARTICIPATION AGREEMENT FOR REVIEW AND WRITTEN APPROVAL. ALL FRANCHISES MUST HAVE A WRITTEN APPROVAL FROM FRANCHISE UPON SUBMISSION OF THIS FORM.
In requesting participation, I agree that the firm and the Designated REALTOR®/Broker will be responsible for all feet assessed to Participants, as well as any user fees which are due and payable for individual services rendered, as set forth in the fee schedule available to Participants. I understand, as a Designated REALTOR®/Broker, I are responsible for all licenses in my office and the licensees' access to the WARDEX database through my participation. The firm also agrees that it is jointly and severally liable for all service fees incurred by the firm and/or said licensees. It is further understood that there will be no refunds of said fees.
As a Participant, I have read, understand and agree to abide by the SERVICE Bylaws and Rules and Regulation. It addition, I understand that the information obtained from the SERVICE is confidential and proprietary market information, which is available only to Participants and Subscribers of the SERVICE. I agree that I will not provide access to or information from the SERVICE to unapproved and/or licensed individuals, non-participating real estate licensees or members of the public at large. I further agree that I will not share nor use any other WARDEX login/password. Violation of this provision is a violation of the WARDEX Rules and Regulations.
All data submitted to the SERVICE becomes the property of WARDEX. As a Participant, I agree to utilize all data received by the SERVICE in accordance with the SERVICE Rules and Regulations. Designated REALTOR®/Broker is hereby noticed that all data obtained from the SERVICE is federally copyrighted Providing SERVICE information to unauthorized recipients may be a copyright violation. Any violation of said copyright will be prosecuted to the fullest extent of the law.
As a Participant, I attest that I own the intellectual property rights or have entered into a license agreement for any and all photos or videos I enter into the system. Violation of this provision is a violation of the WARDEX Rules and Regulations.
As a Participant, I authorize all licensees in my office to have access to the SERVICE through my office or their own personal computer equipment. It is understood that IDX feeds require separate application and approval (reference WARDEX Internet Data Display Agreement).
This Participation Agreement may be terminated upon written notice to the SERVICE and can be terminated by the SERVICE in accordance with its Rules and Regulation. Upon termination, I understand that all data from the SERVICE must be immediately destroyed; or said holder of said data will be in violation of the Federal Copyright.
Due to the serious nature of the agreement, I agree to review with each licensee in my office the potential consequences of a violation of the WARDEX Rules and Regulations, especially as it is related to the unauthorized dissemination of SERVICE copyright information.
DATE:
Designated Broker Name (type or print clearly
Designated Broker signature:
Firm name (type or print clearly):
Firm address (type or print clearly):