

# REALTORS ASSOCIATION of Hamilton-Burlington

## MEMBERSHIP APPLICATION FORM

		BROKERAGE:		NEW	NAME CHANGE
PRINCIPAL BROKER:	NEW <input type="checkbox"/>	TRANSFER	<input type="checkbox"/>		
BROKER:	NEW <input type="checkbox"/>	TRANSFER	<input type="checkbox"/>	CORPORATION <input type="checkbox"/>	<input type="checkbox"/>
SALESPERSON:	NEW <input type="checkbox"/>	TRANSFER	<input type="checkbox"/>	SOLE PROPRIETOR <input type="checkbox"/>	<input type="checkbox"/>
ASSOCIATE MEMBER:	NEW <input type="checkbox"/>	TRANSFER	<input type="checkbox"/>	BRANCH <input type="checkbox"/>	<input type="checkbox"/>

I, \_\_\_\_\_ hereby make application for **MEMBERSHIP/MEMBERSHIP TRANSFER** in the **REALTORS ASSOCIATION OF HAMILTON-BURLINGTON (RAHB)** as a **PRINCIPAL BROKER, BROKER, OR SALESPERSON**, being licensed with the **Brokerage** of or Associate Member being associated with the Appraisal Firm of:

OFFICE \_\_\_\_\_

ADDRESS \_\_\_\_\_

BUSINESS TELEPHONE# (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

OFFICE TRANSFERRING FROM \_\_\_\_\_

ADDRESS \_\_\_\_\_

I WILL BE ACTING AS BRANCH MANAGER OF THE OFFICE INDICATED ABOVE . YES  NO

**PERSONAL INFORMATION: (PLEASE ATTACH PHOTO FOR PHOTO ID CARD)**

BIRTH DATE   /  /   HOME TELEPHONE # (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
MM DD YY

PAGER # (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

(Required for automatic \$25,000 AD&D insurance coverage)

APPEAR IN ROSTER YES  NO

HOME ADDRESS: \_\_\_\_\_

**Attached to this application is my payment in the amount of \_\_\_\_\_ which covers the Entrance Fee, the Dues for the REALTORS ASSOCIATION of Hamilton-Burlington, the Canadian Real Estate Association, the Ontario Real Estate Association, or the Transfer Fee, plus GST (Cheque, Cash, Visa, Master Card or Interact accepted).**

I understand that should my membership be terminated for any reason within forty-five (45) days from the date the Board application is received by the Board in which case, the RAHB **Entrance Fee only** will be refunded, provided written evidence is submitted with respect to my severance.

I further understand that my membership in the RAHB shall lapse when I cease to be employed by the above named Brokerage. Upon re-application for Board Membership a further **ENTRANCE FEE** shall be applicable should membership lapse for a period longer than one (1) year.

**All applications and transfers MUST be submitted to the Board office within 15 days from the date on the license. Late submissions will result in fines to the Broker Member.**

I agree to adopt and abide by the Bylaw, Rules & Regulations of the Board and the Standards of Business Practice, Code of Ethics of The Canadian Real Estate Association.

I agree to initiate no lawsuits of any kind against the Board, its Directors, Officers, Servants, Agents or Employees arising out of any act or omission by them with the considered rejection or acceptance of this application. I agree if this application is accepted, I will not at anytime initiate any lawsuit against the Board, its Directors, Officers, servants or employees, for any act or omission by them in the exercise of any power in the performance of any duty pursuant to the Bylaw and Rules & Regulations of the Board.

**I will attend an Orientation Program set by the Board before receiving full membership.**

**I CERTIFY THAT:**

a) I am a licensed Real Estate Broker /Salesperson OR qualify as an Associate Member under the RAHB Bylaw

b) I will personally be liable for any monies owed by myself to the Board

c) I will attend:

**1) The Orientation Program set by the Board (Total time - ½ day)**

**2) Computer Training Level 1 (Total time - ½ day)**

**before receiving full membership.**

I further understand that in order for my membership to continue, I must remain qualified in accordance with (a) to (c).

**The applicant for membership certifies that he/she is complying with all legal obligations be they financial, contractual, judicial orders or judgments, arbitration or disciplinary awards or orders, or otherwise, or if unable to so certify, outline the reasons for non-compliance.**

I acknowledge and agree that the submission of this membership application constitutes my consent to the collection, use and disclosure by the REALTORS ASSOCIATION of Hamilton-Burlington (RAHB) of the information submitted in this Membership Application and any other personal information about me collected by RAHB during the course of my Membership.

I understand that the collection, use and limited disclosure of any personal information will only be for the purposes of fulfilling RAHB's mandate, including the provision of services, products and information to me by the RAHB, or any organization authorized by the RAHB, and only in a manner consistent with the RAHB's Privacy Policy, a copy of which has been provided or otherwise made available to me.

**OVER PLEASE**

Subject to applicable laws and with specific exceptions to protect the privacy of third parties, I understand, that I may access my personal information held by the RAHB and may submit comments on or corrections to such information for inclusion with my personal information.

**MLS® OPTION SELECTION**

**CATALOGUES:**

HE  HW  HM   
 BURLINGTON   
 I.C.&I

**DAILIES:**

HAMILTON   
 BURLINGTON  PERF  NON PERF   
 OTHER   
 TOP SHEETS   
 COMPUTER  (if checked , please complete next section)  
 NO CHANGES IF TRANSFER

**QUARTERLY SOLD CATALOGUES**

HE  HW  HM  BURL  I.C.&I   
 HE = HAMILTON EAST HW = HAMILTON WEST  
 HM = HAMILTON MOUNTAIN

*Future changes may be made by accessing on-line computer program #60.*

**COMPUTER PASSWORDS  
 PERSONAL AND CONFIDENTIAL**

**"SIGN ON" MEMBER IDENTIFICATION**

All members have an identification code which is usually made up of the first five (5) letters of their surname, followed by the first two (2) letters of their given name. All members must use their identification code to "SIGN ON" to the Board computer system.

The Identification code is followed by a **Personal Password** consisting of **MINIMUM six (6)** and **no more than eight (8) characters** (letters and/or numbers).

Please provide your "PERSONAL PASSWORD" in the boxes.

This password is for your own use and must **NOT** be used by **ANY OTHER** person. Members will be subject to penalties for non-compliance of the Bylaw. You will be instructed to change your password on every anniversary of joining the RAHB..You **MUST** select a **DIFFERENT** password from the previous.

**FOR PRINCIPAL BROKERS APPLICATION ONLY**

I maintain a Trust Account in: \_\_\_\_\_ Bank

I was first licensed to sell Real Estate on \_\_\_/\_\_\_/\_\_\_ with: \_\_\_\_\_

I have been a Real Estate Broker since \_\_\_/\_\_\_/\_\_\_.

I employ \_\_\_\_\_ Salespeople (insert number)

I certify that:

**I am in a position to meet my finance obligations to other Board Members and to the Public**

Is there any person or corporation whose name is not disclosed on the declaration of shareholdings submitted with and forming part of this application, who has any financial interest in the applicant or otherwise exercise control over the applicant? YES  NO

If YES, please provide details: \_\_\_\_\_

*I have provided all information truthfully on this entire application form, and if accepted into membership, I agree to conform to all the requirements and obligations of the REALTORS ASSOCIATION of Hamilton-Burlington. I hereby consent to the verification or any or all of the information given.*

DATE LICENSE ISSUED WITH PRESENT BROKER \_\_\_\_\_ DATE LICENSE EXPIRES \_\_\_\_\_  
 MM DD YY MM DD YY

LICENSE REGISTRATION #(ATTACH COPY): \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_  
 MM DD YY

Broker/Manager Signature: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_  
 MM DD YY

VISA  MASTER CARD  NAME ON CARD \_\_\_\_\_

CARD NUMBER \_\_\_\_\_ EXPIRY DATE \_\_\_/\_\_\_/\_\_\_  
 MM YY

AUTHORIZED SIGNATURE \_\_\_\_\_