

Caldwell Board of REALTORS®

**APPLICATION FOR REALTOR® MEMBERSHIP 2023**

I hereby apply for REALTOR® Membership in the Caldwell Board of REALTORS® (CBOR), enclosing payment in the amount of $\_\_\_\_\_\_\_\_\_\_\_\_\_\_ for my dues payable to **O.A.M. (OldenKamp Association Management)**. I understand that my dues are nonrefundable. I will attend orientation within 120 days of CBOR’s confirmation of membership or the next available. Failure to meet this requirement may result in having my membership terminated. I agree to abide by the Code of Ethics of the NATIONAL ASSOCIATION OF REALTORS®, which includes the duty to arbitrate (or to mediate if required by the board) and the Constitution, Bylaws and Rules and Regulations of the above-named Board, the State Association and the National Association. I understand membership brings certain privileges and obligations that require compliance. Membership is final only upon approval by the Board of Directors and may be revoked should completion of requirements, such as orientation, not be completed within timeframe established in the board’s bylaws. I understand that I will be required to complete periodic Code of Ethics training as specified in the board’s bylaws as a continued condition of membership

\*Amount shown is prorated for National, State and local dues according to month joining unless membership was held the previous year. I hereby submit the following information for your consideration:

**INFORMATION TO BE SUPPLIED BY LOCAL BOARD**

JOIN DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ NRDS#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PERSONAL INFORMATION**:

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

Last Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Nickname \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

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

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

E-mail Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Real Estate License # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**COMPANY INFORMATION:**

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

Location: Branch: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PREFERRED MAILING/CONTACT INFORMATION:**

Preferred Phone: Cell Office Home (circle one)

Preferred Mailing: Home Office (circle one)

**APPLICANT INFORMATION: (Do not answer the following 3 questions if you answer No.)**

1. Are you currently or have you previously been a member of this or any other Association of

REALTORS®? Yes No (circle one)

 If yes, name of Association \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ NRDS#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. Last date (year) of completion of NAR’s Code of Ethics training requirement:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. Have you been found in violation of the Code of Ethics or other membership duties in any Association of REALTORS® in the past 3 years or are there any such complaints pending? Yes No

(If yes, provide details.) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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 grounds for revocation of my membership if granted. I further agree that, if accepted for membership in the Board, I shall pay the fees and membership annually per calendar year. NOTE: Payment to the Caldwell Board of REALTORS® is not deductible as a charitable contribution. Such payments may, however, be deductible as an ordinary and necessary business expense.

As a Member of CBOR we will communicate with you through email and our website www.caldwellboardofrealtors.com.

The Board does not sell or share member email lists with third parties. 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.

Dated: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**RETURN THE ABOVE FORM AND PAYMENT TO:**

O.A.M. (OldenKamp Association Management)

c/o Cindy OldenKamp

12729 Wild Rose Lane

Nampa, Idaho 83686

WELCOME! We are so glad you are joining the Caldwell Board of Realtors. Be sure and watch for the classes, luncheons, and other events that are your benefits of membership.

If you have any questions, please contact Cindy OldenKamp at 208-880-3094 or email at CindyOldenKamp98@gmail.com

 **Caldwell Board of REALTORS® DUES 2023**

**New REALTOR® Members**:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | January | February | March | April | May | June |
| NAR | $195.00 | $182.50 | $170.00 | $157.50 | $145.00 | $132.50 |
| IR | 180.00 | 165.83 | 151.67 | 137.50 | 123.33 | 109.17 |
| IR/PS Fee | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 |
| CBOR | 160.00 | 150.00 | 140.00 | 130.00 | 120.00 | 110.00 |
|  |   |   |  |  |  |  |
| **TOTAL** | **$545.00** | **$508.33** | **$471.67** | **$435.00** | **$398.33** | **$361.67** |
|  | July | August | September | October | November | December |
| NAR | $120.00 | $107.50 | $95.00 | $82.50 | $70.00 | $57.50 |
| IR | 95.00 | 80.83 | 66.67 | 52.50 | 38.33 | 24.17 |
| IR/PS Fee | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 |
| CBOR | 100.00 | 90.00 | 80.00 | 70.00 | 60.00 | 50.00 |
| Application Fee |  |  |  |  |  |  |
| **TOTAL** | **$325.00** | **$288.33** | **$251.67** | **$215.00** | **$178.33** | **$141.67** |

\*$10.00 Idaho REALTORS® Professional Standards Fee is Mandatory for primary and secondary members.

If you join on or after November 1st the initial dues payment amount will also include the next years Membership dues including NAR, IR and CBOR.