FOR OFFICE USE ONLY		
NRDS#		
ORIENTATION		
APPLICATION FOR	SECONDARY MEMBER	R <i>SHIP</i>
STEPHENVILLE ASS	SOCIATION OF REALT	ORS®
465 S. Graham St. Step	ohenville, TX 76401	
254.965.4002 email ad	ddress: saorboard@qmai	<u>l.com</u>
NAME OF OFFICE AND	BROKER:	
NAME AS SHOWN ON	LICENICE.	
	V	91
LICENSE #:		
TYPE OF SALESMAN:	Salesman	Broker
DATE OF BIRTH:		
HOME ADDRESS:		
	\ C	
TELEPHONE:	Home	Cell
EMAIL:		
BUSINESS ADDRESS:		
DUCINICS TELEBUONE		FAV
BUSINESS TELEPHONE		FAX:
PLEA	SE INCLUDE A COPY OF	YOUR DRIVERS LICENSE WITH THIS APPLICATION.
I hereby apply for secondary n	nembership in the above Stephen	ville Association of Realtors® and will enclose my check in the amount of \$
		cepted to secondary membership of the Stephenville Association of Realtors®.
subsequently seeks membershi membership duties within the	ip. This file shall include: previous past three (3) years, pending co	embership file of information which may be shared with other boards/associations where applicant is applications for membership, all final findings of Code of Ethics violations and violations of other mplaints alleging violations of Code of Ethics or alleging violations of other membership duties, a requests, and information related to unpaid arbitration awards or unpaid financial obligations to
The fee for Secondary joining the SAOR.	Membership will be \$200	for Brokers and \$100 for each Agent under that Broker, to be paid when
APPLICATION FEE:	\$ 50.00	
MEMBERSHIP FEE:	\$200.00 (Broker)	\$100.00 (Agent)

(\$65 monthly hereafter)

MLS DUES:

TOTAL DUE: \$315.00 (Agent)

__65.00