



Lexington-Bluegrass Association of REALTORS
 2250 Regency Rd Lexington, KY 40503
 859-276-3503 fax 859-277-0286

AFFILIATE MEMBERSHIP APPLICATION
As of January 1, 2017

Company Name _____

Contact Person: _____ Office Number _____ (LBAR assigned)

Office Address _____ City, State & Zip _____

Office phone #: _____ Office fax #: _____ Cell phone # _____

E-mail address _____ Web site _____

Description of services _____

Would you like to offer any special coupons or discounts to Realtor members of LBAR? Yes No

Do you or have you ever held a Real Estate License? Yes No

Additional members from same office (please PRINT info) @\$25/ea:

 Name email cell# or direct line

 Name email cell# or direct line

 Name email cell# or direct line

Are you bonded? _____ Amount of bond? _____ Name of insurance _____

Have you or your firm been convicted, arrested, adjudged, or otherwise recorded as guilty by a final judgement of any court of competent jurisdiction of a felony or other crime? _____ If yes, provide details: _____

NOTE: All home inspectors applying for membership MUST hold a valid Kentucky inspectors license thru Kentucky Board of Home Inspectors. Please provide your inspector license number _____

NOTE: With initial affiliate and affiliate associate application for a Supra key and for existing keyholders as of January 1, 2017, affiliate and affiliate associate members must provide the following:

- Proof of \$250,000 liability insurance
- Copy of their government issued photo ID
- Background check (updated every 5 years in October). Background checks may be obtained from Ky State Police website: http://www.kentuckystatepolice.org/background_check_forms.html and you would select the "Employment" category.

Send a jpg, pdf, or png file of your logo to margaux@lbar.com for use on LBAR.com website.

Please inform the Association office if there is a change in any of the above information.

Please make sure to "like" the Lexington-Bluegrass Association of REALTORS facebook page!

DUES AND FEES ARE NOT REFUNDABLE



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AFFILIATE MEMBER APPLICANT

I (print name) _____ hereby apply for AFFILIATE membership in the Lexington-Bluegrass Association of REALTORS®, enclosing my check in the amount of \$_____ for this office. (Dues are \$300/yr prorated monthly.) I agree that, if accepted for membership in the Association, I shall pay the fees and dues as from time to time established. I also agree to abide by the Bylaws and the Rules and Regulations of the Lexington-Bluegrass Association of REALTORS®.

I consent that the Association, may invite and receive information and comments about me from any member or other person, and I further agree that any information and comment furnished to the Association by any person in response to the invitation shall be conclusively deemed to be privileged and not form the basis of any action by me for slander, libel, or defamation of character. The Board of Directors of LBAR has the right at any time to terminate membership to any one, by a majority vote. LBAR does not have to offer any explanation to the terminated member, however, LBAR will notify terminated member and refund the prorated dues to that member. The association reserves the right to deny membership or deny renewal of membership to any Affiliate by a majority vote of the Board.

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.

Signed _____ (Applicant) Date: ____-____-____

Roster File Authorization

Any Affiliate member may request a file of member names and addresses in an Excel format to be emailed to the email listed in your member record. By signing this acknowledgement below, you agree not to distribute this file to any other party and only use the list for mailings related to your affiliate business.

As an Affiliate member in good standing of the Lexington-Bluegrass Association of Realtors, when I request a file consisting of names and addresses of active Realtor members of the Association, I agree to use this list ONLY for mailings associated with my affiliate business. I further agree that if my affiliate membership with LBAR should become inactive, I will no longer use this address file.

I acknowledge that distribution of this file to any other party is strictly prohibited.

Signed _____ (Applicant) Date: ____-____-____

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