



HUDSON GATEWAY ASSOCIATION OF REALTORS®, INC.

60 South Broadway, White Plains, New York 10601

914.681.0833 • Fax 914.681.6044 • www.HGAR.com

9 Coates Drive, Suite 1, Goshen, New York 10924 • 845.294.7905

2 Medical Park Drive, Suite 17A, West Nyack, New York 10994 • 845.735.0075

I hereby apply for REALTOR® Membership in the Hudson Gateway Association of REALTORS®, Inc.

I am licensed to practice real estate in New York as a:

☐ Broker

☐ Salesperson

☐ Associate Broker

☐ Licensed or Certified Appraiser

I ☐ AM ☐ AM NOT an Owner, Principal, Proprietor, partner or Corporate Officer of the real estate brokerage or appraisal firm with which I am affiliated. (If you ARE an Owner, Principal, etc., please complete the SUPPLEMENTARY APPLICATION.)

My firm ☐ DOES ☐ DOES NOT have an Owner, Principal, Proprietor, Partner or Corporate Officer who holds current REALTOR membership in this Association or in another Realtor board or Association

I ☐ AM ☐ AM NOT affiliated with real estate firm whose Principal Broker(s) hold(s) current membership in this Association or in Realtor board or Association

Are you currently, or have you ever held membership in a REALTOR® Organization? ☐ NO ☐ YES

If YES, please enter REALTOR® Organization: _____ State: _____

If you are a currently a REALTOR® member we **MUST** have documentation from that board providing the following:
1. Letter of Membership in good standing. 2. Your member NRDS # 3. Your office NRDS # (National Realtor Database System)

☐ I wish to designate HGAR as my Primary Association.

☐ I wish to join HGAR as a Secondary Association

☐ Mr ☐ Mrs ☐ Ms

APPLICANT INFORMATION

Preferred mail (check one) ☐ Home ☐ Office

Name: _____

Please print name as it appears on your license (First) (Middle Initial) (Last)

NYS Real Estate License Registration ID: _____ Expiration Date: ____/____/____

Home Address (REQUIRED)

Office Name & Address

Mailing Address

Office Name

Street Address (if Different from above)

Street Mailing Address

City State Zip

City State Zip

Contact Phone #: (_____) _____ - _____

Office Phone #: (_____) _____ - _____ Ext: _____

Personal Fax#: (_____) _____ - _____

Office Fax #: (_____) _____ - _____

Email address:(REQUIRED)

Office Email

Your Agent Web Address

Office Web

FAX TO: 914-681-6044 or 845-294-3414
OR EMAIL Membership@HGAR.com

Office Use

Member #: ____ _

REALTOR® is a registered mark which identifies a professional in real estate who subscribes to a strict Code of Ethics as a member of the NATIONAL ASSOCIATION OF REALTORS®.



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I UNDERSTAND AND AGREE TO THE FOLLOWING APPLICATION AND APPROVAL PROCEDURES:

Payment of the Initiation Fee and Annual Dues (see Annual Dues Schedule) must accompany this application.

I agree to attend a 3 ½ hour New Member Orientation course of the Association. I may do so at any scheduled orientation course from the date of this application to a date not later than 30 days after acceptance of my application by the Board of Directors.

I acknowledge that my membership will become effective on the date when BOTH of the following conditions are met: a) The directors have accepted my application, AND, b) I have attended a New Member Orientation.

I understand that my Initiation Fee and Annual Dues will be returned in full if the Directors do not accept my application. However, I also agree that the Association shall retain \$25 as a processing fee in the event that my application is accepted by the Directors but I fail to attend a New Member Orientation in the prescribed period.

I AGREE TO ABIDE BY THE FOLLOWING REQUIREMENTS AND RULES OF MEMBERSHIP UPON MY ACCEPTANCE TO MEMBERSHIP IN THE HUDSON GATEWAY ASSOCIATION OF REALTORS®, INC.:

I agree to abide by the Code of Ethics of the NATIONAL ASSOCIATION OF REALTORS®, including the obligation to arbitrate any future disputes with another Member in accordance with Association arbitration procedures. I also agree to abide by the Constitution, Bylaws, and Rules and Regulations of the above named Association, the State Association, and the National Association, and if required, I further agree to satisfactorily complete a reasonable and nondiscriminatory written examination on such Code, Constitutions, Bylaws, and Rules and Regulations. I consent that the Association, through its Membership Committee or otherwise, may invite and receive information and comment 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 inclusively deemed to be privileged and not form the bias of any action by me for slander, libel, defamation of character.

I acknowledge that if I am accepted as a Member and I subsequently resign from membership in the Association with an ethics complaint or arbitration request pending, the Board of Directors may condition my right to reapply for membership upon my verification that I will submit to the pending ethic or arbitration proceeding and will abide by the decision of the Hearing Panel; or if I resign without having complied with an award in arbitration, the Board of Directors may condition any re-application upon my promise to pay the award, plus any costs that have previously been established as due and payable by me, provided that the award has not, in the meanwhile been otherwise satisfied.

I understand that I will be required to complete the periodic Code of Ethics training as specified in the association's bylaws as a condition of continuing membership.

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 number, 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.

I herewith submit payment of the Initiation Fee \$ _____ and Annual Dues \$ _____

in the total amount of \$ _____

Effective Date _____ / _____
MONTH / YEAR

Applicant: _____
PLEASE PRINT

Signature: _____ **Date:** _____

Principal REALTOR: _____
PLEASE PRINT

Signature of Principal REALTOR: _____ **Date:** _____

FAX TO: 914-681-6044 or 845-294-3414
OR EMAIL Membership@HGAR.com

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ANNUAL DUES SCHEDULE – 2014

CATEGORIES OF REALTOR MEMBERSHIP

REALTOR, Primary Membership – is available to any applicant who is a licensed broker, associate broker, or salesperson. New York State certified or licensed appraisers are also eligible for Realtor Membership. This category includes membership in the Hudson Gateway Association of REALTORS®, the National Association of Realtors (NAR), and the New York State Association of Realtors (NYSAR). REALTOR Primary Membership applicants must pay an initiation fee, in addition to membership dues, when they file their application. The initiation fee for Realtor applicants is \$100.00. Applicants for Realtor membership are required to attend an orientation program. Information concerning the orientation can be found on the application.

REALTOR, Secondary Membership – is available to Realtors who hold primary membership in another Board of Realtors and who pay State and National Association assessments through that board. A letter in Good Standing from the primary board must accompany application when applying for secondary membership. Local dues only, initiation fee waived.

NEW MEMBER PRORATION SCHEDULE

Membership dues are paid yearly at \$458.00. Depending upon when the individual is approved for Membership, the dues are prorated for that month. The following is the yearly prorated amount to be paid when submitting an application for membership. Dues are not prorated if you held Realtor membership the previous year; the entire year's dues are due at time of rejoining.

Join Month	HGAR Local Dues	+NAR National Dues	+NYSAR State Dues	= SubTotal	+ Initiation	TOTAL DUE
January	\$213.00	\$155.00	\$90.00	= \$458.00	+ \$100	\$558.00
February	\$195.50	\$145.00	\$82.50	= \$423.00	+ \$100	\$523.00
March	\$178.00	\$135.00	\$75.00	= \$388.00	+ \$100	\$488.00
April	\$160.50	\$125.00	\$67.00	= \$353.00	+ \$100	\$453.00
May	\$143.00	\$115.00	\$60.00	= \$318.00	+ \$100	\$418.00
June	\$125.50	\$105.00	\$52.50	= \$283.00	+ \$100	\$383.00
July	\$108.00	\$95.00	\$45.00	= \$248.00	+ \$100	\$348.00
August	\$90.50	\$85.00	\$37.00	= \$213.00	+ \$100	\$313.00
September	\$73.00	\$75.00	\$30.00	= \$178.00	+ \$100	\$278.00
October	\$55.50	\$65.00	\$22.50	= \$143.00	+ \$100	\$243.00
November	\$38.00	\$55.00	\$15.00	= \$108.00	+ \$100	\$208.00
December	\$20.50	\$45.00	\$7.50	= \$73.00	+ \$100	\$173.00

MEMBERSHIP APPLICATION PAYMENT INFORMATION

Primary Membership

Secondary Membership

Local Dues Only

Applicant Name: _____

PLEASE PRINT

Initiation Fee: \$ _____ . _____

Effective Date: _____ / _____

+

Month Year

Dues (Local+State+National): \$ _____ . _____

Total Payable HGAR: = \$ _____ . _____

REALTOR dues are not refundable

(Correct Payment amount MUST be entered in order to process)

Check Enclosed #: _____

Charge to my VISA, MasterCard, American Express or Discover account:

Card #: _____ Exp. Date: _____ / _____

Card holder Signature: _____

Date: _____

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Office Use

Member #: _____

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Supplement to Membership Application for Principal Broker/Designated Realtor Membership

(NOT required for Associate Brokers or Salespersons)

If I am an owner, principal, partner, trustee, or senior operating officer of my firm, I hereby agree, as a condition of membership, to:

- * Appoint myself or another owner, principal, partner, trustee, or senior operating officer of my firm to serve as Designated Realtor for my firm.

Duties of Designated Realtor

The Designated Realtor shall:

- * Report to the Association, in writing, ALL licensees who are affiliated with the firm, within ten (10) days of such affiliation;
- * Report to the Association, in writing, ALL licensees who are separated from the firm, within ten (10) days of such separation;
- * Confirm to the Association, in writing, a correct roster of ALL licensees who are affiliated with the firm, at least once per year, in connection with an annual audit by the Association to be performed on a date certain, with suitable advance notice by the Association.

Furthermore, regarding annual dues, the Designated Realtor shall:

- * Pay annual dues which are computed on the basis of one (1) membership for the Designated Realtor himself or herself, plus an annually published formula rate times the number of licensees affiliated with the firm who are NOT members of the Association.
[Example: If a firm has 10 licensees who are NOT members of the Association, the DR's annual dues are: One Designated Realtor plus 10 times the published rate for non-member licensees.]
In paying the DR formula dues, the DR acknowledges that he/she is not thereby purchasing memberships for the non-member licensees.

Furthermore, regarding new licensees joining the Association:

- * The DR acknowledges that all new licensees or new member applicants are obliged to attend an Orientation Course within a prescribed time of application, and,
- * Failure of any licensee to attend Orientation within the prescribed time results in the membership application being rejected by the Association, at which time rejected applicant is counted as a non-member licensee, and the DR is then assessed an additional formula dues reflecting the affiliation of such nonmember licensee with the firm.

I hereby appoint the following person to be the Designated Realtor:

Name/Title

Mailing address and contact number if different than applicants

Signature of Designated Realtor Applicant

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This course will also satisfy NAR's Mandated Quadrennial Code of Ethic requirement.

Current Quadrennial Period: January 1st, 2013 – December 31st, 2016

Here are the New Member Orientation Dates from
June through December 2014:

Date	Time	Location
<input type="checkbox"/> June 10 - Tuesday	6:00pm - 9:45pm	White Plains
<input type="checkbox"/> June 12 - Thursday	10:00am - 1:45pm	White Plains
<input type="checkbox"/> June 20 - Friday	9:00am - 12:45pm	West Nyack
<input type="checkbox"/> July 10 - Thursday	10:00am - 1:45pm	White Plains
<input type="checkbox"/> July 18 - Friday	9:00am - 12:45pm	Goshen
<input type="checkbox"/> August 5 - Tuesday	6:00pm - 9:45pm	White Plains
<input type="checkbox"/> August 21 - Thursday	6:00pm - 9:45pm	West Nyack
<input type="checkbox"/> September 12 - Friday	9:00am - 12:45pm	Goshen
<input type="checkbox"/> September 12 - Friday	10:00am - 1:45pm	White Plains
<input type="checkbox"/> September 19 - Friday	6:00pm - 9:45pm	White Plains
<input type="checkbox"/> October 14 - Tuesday	10:00am - 1:45pm	White Plains
<input type="checkbox"/> October 21 - Tuesday	6:00pm - 9:45pm	White Plains
<input type="checkbox"/> October 23 - Thursday	9:00am - 12:45pm	West Nyack
<input type="checkbox"/> November 7 - Friday	9:00am - 12:45pm	Goshen
<input type="checkbox"/> November 17 - Monday	2:00pm - 5:45pm	White Plains
<input type="checkbox"/> November 19 - Wednesday	6:00pm - 9:45pm	White Plains
<input type="checkbox"/> December 4 - Thursday	10:00am - 1:45pm	White Plains
<input type="checkbox"/> December 11 - Thursday	9:00am - 12:45pm	West Nyack

Please register me for the above Orientation

Print Name: _____

Signature: _____ Date: _____

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Office Use

Member #: _ _ _ _ _