



MINNEAPOLIS AREA Association  
of REALTORS®

FOR OFFICE USE ONLY	
Member # _____	
Office # _____	MLS Y/N _____
Amt Paid \$ _____	Rvwd by _____

## Application for Affiliate Membership

Personal

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

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

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

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

Office Address \_\_\_\_\_

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

Office Phone \_\_\_\_\_ Home Phone \_\_\_\_\_

Fax Number \_\_\_\_\_ Date of Birth (Month/Day/Year) \_\_\_\_\_

Preferred Email Address (required) \_\_\_\_\_ DUES BILLED ANNUALLY BY EMAIL ONLY

Website (optional) \_\_\_\_\_

Professional

Service Provided: (check one)

- |   |  |
|---|--|
| <input type="checkbox"/> Appraisers                         | <input type="checkbox"/> Insurance         |
| <input type="checkbox"/> Attorney                           | <input type="checkbox"/> Marketing         |
| <input type="checkbox"/> Closers                            | <input type="checkbox"/> Mortgage Co.      |
| <input type="checkbox"/> Consultants                        | <input type="checkbox"/> Photography       |
| <input type="checkbox"/> Government Agencies                | <input type="checkbox"/> Property Managers |
| <input type="checkbox"/> Home Inspectors                    | <input type="checkbox"/> Publications      |
| <input type="checkbox"/> Home Stager                        | <input type="checkbox"/> Title Companies   |
| <input type="checkbox"/> Other, please specify _____        |  |
| <input type="checkbox"/> I wish to register for a Supra Key |  |

\*Qualified Key Holders – Affiliate members of the Association who are not licensed by the state of Minnesota, will re-quire satisfactory completion of a criminal background check through MAAR's vendor at your own expense. Criminal Background checks shall be required every three years to maintain keyholder privileges.

Total Enclosed \$ \_\_\_\_\_ Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

(Over - complete reverse side )



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## Affiliate Member Code of Conduct

### Article 1

The Affiliate Member (Affiliate) shall provide equal professional service to any person regardless, of race, color, religion, sex, disability, familial status, national origin, creed, marital status, sexual orientation, status with regard to public assistance or handicap, whether physical or mental. I understand that local ordinances may include other protected classes.

### Article 2

The Affiliate shall be informed and do business in accordance with laws, governmental regulations and public policies in the field in which the Affiliate customarily engages.

### Article 3

The Affiliate shall provide a level of competent service in keeping with the standards of practice in the field in which the Affiliate customarily engages.

### Article 4

The Affiliate shall promote business in a positive and professional manner based on individual merit and those of the Affiliate Company.

### Article 5

The Affiliate shall not denigrate competitors in an attempt to gain business. The Affiliate shall not attempt to gain any unfair advantage over competitors by knowingly or recklessly making false or misleading statements about competitors, REALTOR® members or affiliate members.

### Article 6

The Affiliate shall interact with all affiliate members within the guidelines of this Code of Conduct.

### Article 7

The Affiliate shall not undertake activities that compromise or interfere with the contractual business relationship REALTOR® and affiliate members have with their customers and clients.

### Article 8

The Affiliate shall abide by all of the rules and regulations contained in the Common Lock Box Rules (should they so subscribe). In addition affiliates will follow the rules and regulations contained in the Association Bylaws and will aspire to follow the rules and regulations contained in the Code of Ethics of the National Association of REALTORS®. This would include cooperation in any disciplinary proceedings or investigations conducted by the Association.

I do so subscribe:

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Signature

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Date