



## AFFILIATE MEMBERSHIP APPLICATION

*Affiliate Members are individuals who, while not engaged in the real estate profession, have interests concerning real estate, and are in sympathy with the objectives of the REALTOR® organization.*

*There is a one-time \$25 application fee; annual dues are \$100 (Sept. 1 – Aug. 31, not prorated). To process your membership, please complete this form and return to the OABR office with \$125 payment (check or bank card):*

*Mail or in person: Attn: Debbie, Omaha Area Board of REALTORS®, 11830 Nicholas Street, Omaha, NE 68154.  
Fax: 402-619-5559. Email: [Debbie@OmahaREALTORS.com](mailto:Debbie@OmahaREALTORS.com).*

*Payment must accompany the application. Please allow at least 30 minutes for processing. Regular office hours are 8:00 a.m. to 4:45 p.m., Monday through Friday. Once accepted into membership, there are no refunds.*

I hereby apply for an individual Affiliate Membership in the Omaha Area Board of REALTORS®. I understand this membership does not include membership in the National Association of REALTORS®, or the Nebraska REALTORS® Association, and does not include the right to use the term REALTOR®.

### **I. PERSONAL INFORMATION**

LAST NAME: \_\_\_\_\_ FIRST: \_\_\_\_\_ MIDDLE: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ ST: \_\_\_\_\_ ZIP: \_\_\_\_\_

MOBILE PH: \_\_\_\_\_ HOME PH: \_\_\_\_\_

PERSONAL EMAIL ADDRESS: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

### **II. BUSINESS INFORMATION**

BUSINESS NAME: \_\_\_\_\_

BUSINESS OWNER: \_\_\_\_\_

BUSINESS DESCRIPTION: \_\_\_\_\_

BUSINESS WEB ADDRESS (URL): \_\_\_\_\_

BUSINESS EMAIL ADDRESS: \_\_\_\_\_

BUSINESS ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ ST: \_\_\_\_\_ ZIP: \_\_\_\_\_

OFFICE PH: \_\_\_\_\_ OFFICE FAX: \_\_\_\_\_

### **III. OTHER INFORMATION**

1. Indicate your relationship to the Business listed above (owner, partner, employee, other):

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2. List at least two active, licensed real estate agents who are members of the Omaha Area Board of REALTORS®, from two separate companies who can be contacted regarding your application:

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3. Do you currently, or have you ever, held membership in this or any other REALTOR® organization or Multiple Listing Service organization? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please name the organization(s), the type of membership held, and the dates of membership: \_\_\_\_\_

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4. Have you ever been convicted of a felony, or do you currently have any felony

charges pending against you? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, explain (attach additional pages if necessary): \_\_\_\_\_

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#### **IV. DECLARATIONS**

I agree to abide by the bylaws, rules and policies of the Omaha Area Board of REALTORS® and the Great Plains REALTORS® MLS, as may be amended from time-to-time; and to familiarize myself with the REALTOR® Code of Ethics and to conduct business in conformance with its principles. Any member may be reprimanded, fined, placed on probation, suspended, or expelled for a violation of these tenets for conduct which, in the opinion of the Board of Directors when applied on a non-discriminatory basis, reflects adversely on the term REALTOR®, REALTORS®, and the real estate industry, or for conduct that is inconsistent with or averse to the objectives and purposes of the REALTOR® organization.

I irrevocably waive all claims against the Omaha Area Board of REALTORS® and the Great Plains REALTORS® MLS or any of its employees, officers, directors and members for any act in connection with the business of the organization and particularly as to its acts in electing or failing to elect, suspending, expelling or otherwise disciplining me as an applicant, or as a member or former member.

I further certify that the business listed above does not engage in any activity that requires a Nebraska Real Estate License or Appraisal License.

I certify that the information furnished by me in this application 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 to pay all required dues and fees.

Your membership acknowledges your agreement to be contacted by the Omaha Area Board of REALTORS® or the Great Plains REALTORS® MLS via mail, telephone, facsimile, electronic text or email. I understand my initial membership is temporary and is subject to and investigation and verification, publication in the member newsletter, and approval by the Board of Directors.

I authorize the Omaha Area Board of REALTORS® and the Great Plains REALTORS® MLS to investigate, invite and receive information and comment about me from members, other persons or entities, and I agree that any information or comment furnished in response to any such invitation shall be conclusively deemed to be privileged and will not form the basis of any legal action by me, including slander, libel, or defamation of character.

**Date:** \_\_\_\_\_ **Signature:** \_\_\_\_\_

Return to:

Debbie Peterson  
Membership & Accounting Manager  
Omaha Area Board of REALTORS®  
11830 Nicholas Street  
Omaha, NE 68154  
402-619-5553 direct  
402-619-5559 fax  
[Debbie@OmahaREALTORS.com](mailto:Debbie@OmahaREALTORS.com)

[www.OmahaREALTORS.com](http://www.OmahaREALTORS.com)

**FOR OFFICE USE**

\$ \_\_\_\_\_ total received

\_\_\_\_\_ company owned  
\_\_\_\_\_ individually owned

ID# \_\_\_\_\_

Office ID# \_\_\_\_\_

Date activated \_\_\_\_\_

NRDS# \_\_\_\_\_

SupraKEY Agreement Attached  
 Insurance Certificate Received

**For bank card payments (American Express/Discover/MasterCard/VISA):**

Amount \$125.00

Card # \_\_\_\_\_

Exp. Date \_\_\_\_\_ CVV: \_\_\_\_\_

Name on card \_\_\_\_\_

Billing Address \_\_\_\_\_

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

Authorized signature: \_\_\_\_\_

Authorized signature: \_\_\_\_\_