

Procedure for Application for Membership of the Burke County Board of REALTORS®

1. Application is made through the Board Association Executive.
2. Applicant is given a Membership Packet, which includes all necessary forms, and literature that should be read by the applicant and explained by the principal broker before the application for membership form is filled out.
3. Applicant carefully fills out the application for membership and returns the forms and the applicants payment information to the Board Association Executive. The Board Association Executive investigates the applicant.
4. Applicant who is working with a member firm must work with their Principal Broker to apply for MLS Membership with Canopy MLS.
5. Applicant must attend a Board Orientation Course. After being notified of the date of the Board by the Board, any applicant to the Burke County Board, being a Subscriber under an existing Participant, or a new Broker in Charge (Participant), must attend the first available Orientation Course offered. Should applicant fail to attend this course, the applicant will be given the opportunity to attend the next available course. Should the applicant fail to attend the second course, the application will be canceled and all fees forfeited. All firms will be notified of the cancellation and the MLS access will be denied. Should the person wish to re-apply, Orientation Course must be taken first, and then all fees re-paid in order to reinstate the application, then all fees in order to reinstate the application.
6. The Board Association Executive shall report its recommendations to the Board of Directors in writing. The Board of Directors, during their regular monthly meeting will approve the applicant if all requirements for membership have been met.
7. After completion of all requirements for membership, including payment of fees to the Burke County Board of REALTORS®, Inc. the applicant will be installed at the next regular meeting of the Burke County Board of REALTORS®, Inc. or as soon as possible thereafter.

All fees are non-refundable if applicant decides to withdraw his/her membership application. All fees are forfeited, and no money will be returned to applicant.

I have read, agree, and understand the above Procedure for Application for Membership in the Burke County Board of REALTORS®, Inc.

Applicant's Signature

Date

Please retain a copy for yourself and return with the original signature.

Attach a recent photograph

APPLICATION FOR REALTOR® MEMBERSHIP
BURKE COUNTY BOARD OF REALTORS®, INC.
305 E. UNION STREET, SUITE B115
MORGANTON, NC 28655
PHONE (828) 437-6411
[EMAIL burkerealtors@gmail.com](mailto:burkerealtors@gmail.com)

I hereby apply for Membership in the BURKE COUNTY BOARD OF REALTORS®, Inc. and am submitting the application fee in the amount of \$500.00 and dues in the amount of \$ _____. ***I understand that dues and fees are non-refundable and will not be returned after my application is received.*** I agree to abide by the Code of Ethics of the NATIONAL ASSOCIATION OF REALTORS®, (including the obligation to arbitrate controversies arising out of real estate transactions as specified in the Code of Ethics and Arbitration Manual), and the Constitution, Bylaws, and Rules and Regulations of the Local, State, and National Associations, and if required, I further agree to satisfactorily complete a reasonable and non-discriminatory written examination on such Code, Constitution & Bylaws, and Rules & Regulations. I understand membership brings certain privileges and obligations that require compliance. Membership is final only upon approval by the Board of Directors and may be revoked should completion of requirements, such as orientation, not be completed within the timeframe established in the association's bylaws. I understand that I will be required to complete periodic Code of Ethics training as specified in the association's bylaws as a continued condition of membership.

NOTE: Applicant acknowledges that if accepted as a member and he/she subsequently resign from the Association or otherwise causes membership to terminate with an ethics complaint pending, the Board of Directors may condition renewal of membership upon applicant's certification that he/she will submit to the pending ethics proceeding and will abide by the decision of the hearing panel. If applicant resigns or otherwise causes membership to terminate, the duty to submit to arbitration continues in effect even after membership lapses or is terminated, provided the dispute arose while applicant was a REALTOR® member.

I am applying for the following membership (please check one):

Designated REALTOR® (Broker-in-Charge)
 Secondary Designated REALTOR®
 Non-Member Salesperson

REALTOR®
 Secondary REALTOR®

I hereby submit the following information for your consideration:

Name (AS SHOWN ON REAL ESTATE LICENSE) _____ Nickname: _____

Type of License: Real Estate Broker Licensed/Certified Appraiser License#: _____

Year Licensed in North Carolina: _____ Do you hold, or have you ever held, a real estate license in another state? _____

Office Name _____ Office Phone: _____

Office Address: _____ City: _____ State: _____ Zip: _____

Home Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____ Direct Line: _____

Preferred Phone: Home Cell Direct Line Preferred Mailing: Home Office

Preferred Email Address: _____ Alternate Email Address: _____

Last Four Digits of your Social Security Number: _____ Date of Birth: _____ Place of Birth: _____

Primary language spoken: _____ What other languages do you speak? _____

Education: High School _____ yrs. College _____ yrs. Degree Earned: _____ School:

Give brief resume since entering real estate or past five (5) years of employment:

Membership in Professional Societies, Fraternal Orders, Service Organizations, Civic Organizations, or Political Office, etc.

Have you previously held membership in any other Association of REALTORS®? Yes No
If so, where? _____ From _____ to _____

If you are now or have ever been a REALTOR®, indicate your NAR membership NRDS #: _____
and last date of completion of NAR's Code of Ethics training requirement: _____

Specialty: Residential Commercial Property Management Appraisal Other:

Are you now employed or engaged in any other business or profession? Yes No

(If yes, please give your position & the location of your other activities)

Have you been found in violation of the Code of Ethics or other membership duties in any other Association of REALTORS® in
the past three (3) years or are there any such complaints pending? Yes No (If yes, provide details as an attachment.)

Have you ever been disciplined by the North Carolina Real Estate Commission or found in violation of another state's real
estate licensing regulations within the last three (3) years? Yes No If so, give details:

Are you involved in any pending bankruptcy or insolvency proceedings, or have you been adjudged bankrupt in the past three
(3) years? Yes No If so, give details:

Have you ever been convicted of a criminal offense other than minor traffic violations: Yes No If so, give details:

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, may be grounds for revocation of my membership if granted. I further agree that, if accepted for membership in the Association, I shall pay the fees and dues as from time to time established. NOTE: Payments to the Burke County Board of REALTORS®, Inc. are not deductible as charitable contributions. Such payments may, however, be deducted as an ordinary and necessary business expense. **Dues payments are non-refundable.**

By signing below, I consent that the REALTOR® Associations (local, state, national) may contact me at the specified address, telephone numbers, fax numbers, 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.

Date: _____ Signature of Applicant:

As Broker-in-Charge, I hereby certify that the applicant has an active license in good standing with the licensing authority. I understand I am obligated to notify association staff immediately if the applicant's license is no longer active or no longer under my supervision. I understand I may be responsible for the applicant's dues and/or fees if the association is unable to collect those dues and/or fees from the applicant if he/she is under my supervision.

Date: _____ Signature of Broker-in-Charge:

2026 DUES SCHEDULE

APPLICATION FEE: \$500.00 for Membership

(Secondary Membership applicants are only charged local dues portion plus the application fee)

Application fee and dues are payable at the time you file your application with the Association. If paying by check, make check payable to the Burke County Board of REALTORS® (BCBOR). **Membership dues shall not be prorated if the licensee held REALTOR® membership during the preceding calendar year.** NAR Consumer Advertising Campaign Assessment is not prorated. Total amount of local dues is tax deductible.

2026 REALTOR® DUES

MONTH	LOCAL	NC REALTORS®	NAR	NAR ASSESSMENT	TOTAL DUES
January	\$340	\$210.00	\$156.00	\$45.00	\$751.00
February	\$311.74	\$192.50	\$143.00	\$45.00	\$692.24
March	\$283.40	\$175.00	\$130.00	\$45.00	\$633.40
April	\$255.06	\$157.50	\$117.00	\$45.00	\$574.56
May	\$226.72	\$140.00	\$104.00	\$45.00	\$515.72
June	\$198.38	\$122.50	\$91.00	\$45.00	\$456.88
July	\$170.04	\$105.00	\$78.00	\$45.00	\$398.04
August	\$141.70	\$87.50	\$65.00	\$45.00	\$339.20
September	\$113.36	\$70.00	\$52.00	\$45.00	\$280.00
October	\$85.02	\$52.50	\$39.00	\$45.00	\$221.52
November	\$56.68	\$35.00	\$26.00	\$45.00	\$162.68
December	\$28.28	\$17.50	\$13.00	\$45.00	\$103.78

2026 NON-DEDUCTIBLE PORTION OF DUES

NC REALTORS® DUES

Dues payments to NC REALTORS® are NOT deductible as charitable contributions for Federal income tax purposes. Such payments however, may be deductible as an ordinary and necessary business expense.

NC REALTORS® lobbying dues are NOT deductible for income tax purposes. NC REALTORS® dues for 2026 are **\$210**. The portion of NC REALTORS® dues attributable to lobbying expenses that are not deductible is **\$29** (or 14.0%). The remainder of NC REALTOR® dues, **\$181**, may be deductible.

NAR DUES

Dues payments to NAR are NOT deductible as charitable contributions for Federal income tax purposes. Such payments, however, may be deductible as an ordinary and necessary business expense.

NAR lobbying dues are NOT deductible for income tax purposes. NAR dues for 2026 are **\$156**. The portion of NAR dues attributable to lobbying expenses that are not deductible is **\$55** (or 35%). The remainder of NAR dues, **\$101**, may be deductible.

In addition to your 2026 NAR dues, NAR also assesses a mandatory Consumer Advertising Campaign assessment of **\$45** to all REALTOR® members. **The entire amount of this assessment qualifies as deductible dues.**

If you have any questions, please consult your business tax advisor/consultant.



Burke County Board of REALTORS®
305 E. Union St., Suite B115
Morganton, NC 28655
Phone: 828-437-6411

DEBIT/CREDIT CARD CHARGE AUTHORIZATION FORM

If you would like to have your invoices automatically charged to your card please fill out and return this form. You may email it BCBOR You will be sent a receipt so you will have a copy for your records.

All personal data information is encrypted and protected by Secure Sockets Layer (SSL). This is to authorize the Burke County Board of REALTORS® to charge my invoices to a credit/debit card for the following dues and fees.

Please check all that are applicable:

- Annual Association dues
- New Member Application Fee
- New Member Association Dues
- Affiliate Member Dues

Card type: Personal Corporate

Visa MasterCard Discover American Express

Card Number:

Expiration Date:

Member Name _____ NCREC # _____

Name on Card _____

Billing Address: _____

Signature _____ Date _____