



## HGAR Application Checklist

Joining as: \_\_\_ Primary Member      \_\_\_ Secondary Member (State & National dues paid through a different Association/board)

### Primary Members:

- IF** joining as an Associate Broker or Salesperson: My Broker is a Member.
- Valid NYS Real Estate or Appraiser license & Expiration Date.  
(Submit a copy with the application or include the info on page one of the application)
- HGAR New Member Orientation date selected (Requirement for NEW Primary Members ONLY).
- \*Valid email address.
- \*Cell phone number.
- Correct payment amount entered.
- If paying by Credit Card: Credit card info included (We are unable to take payments over the phone)  
**OR** if paying by Check: Payment written out to HGAR and submitted with application by mail.
- Application filled out in its entirety.

### Secondary Members:

- Letter in Good Standing from Primary REALTOR® Association (Submitted with application)
- Valid NYS Real Estate or Appraiser license & Expiration Date.  
(Submit a copy with application or include the info on page one of the application)
- HGAR New Member Orientation NOT required.
- \*Valid email address.
- \*Cell phone number.
- Correct payment amount entered.
- If paying by Credit Card: Credit card info included (We are unable to take payments over the phone)  
**OR** if paying by Check: Payment written out to HGAR and submitted with application by mail.
- Application filled out in its entirety.

- **Submit completed application to [Membership@HGAR.com](mailto:Membership@HGAR.com) OR Fax to 914-681-6044 OR Mail to HGAR, One Maple Avenue, 3rd Floor, White Plains, NY 10605**
- ***Incomplete applications will not be processed.***
- **Please allow 3-5 business days for processing** after we receive your completed application. Once processed, you will receive a welcome email with instructions on how to complete the New Member Registration. The email will also include your New Member Orientation Date (if applicable).
- ***Please note that OneKey® MLS access is a separate application found on HGAR.com.***
- Any questions please contact our Member Success Team (MST) at [Support@HGAR.com](mailto:Support@HGAR.com) OR at 914-681-0833.

\* By signing up for membership and/or subscription to our online services, you acknowledge and agree to the use of multi-factor authentication (MFA) as an additional layer of security. MFA helps protect your account by requiring multiple forms of verification, such as a password and a unique code sent to your phone or email. All personal information collected for MFA purposes will be handled securely, in compliance with all state and federal laws/regulations and used solely for authentication. We value your privacy and are committed to safeguarding your data.



**New Member**  
 **Rejoining Member** (Member # \_\_\_\_\_)

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 company \_\_\_ DOES \_\_\_ DOES NOT have an Owner, Principal, Proprietor, Partner or Corporate Officer who holds current REALTOR® membership in this Association or in another REALTOR® Association.

I \_\_\_ AM \_\_\_ AM NOT affiliated with real estate firm whose Principal Broker(s) hold(s) current membership in this Association or in REALTOR® 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 currently a REALTOR® member we **MUST** have documentation from that board providing the following:  
 1. Letter of Membership in good standing. 2. Your NAR Member Number\* 3. Your NAR Office Number\* (\*NRDS #)

\_\_\_ I wish to designate HGAR as my Primary Association. \_\_\_ I wish to join HGAR as a Secondary Association

**Applicant Information:** \_\_\_\_\_

Name: (Please print your name as it appears on your license - First, Middle, Last)

\_\_\_\_\_  
 NYS Real Estate License Registration ID License Expiration Date

\_\_\_\_\_  
 Home Mailing Address Required City State Zip

\_\_\_\_\_  
 Home Phone \*Cell Phone (REQUIRED) Office Ext Personal Fax

\_\_\_\_\_  
 \*Preferred Published Email Address (REQUIRED) Your Agent Web Address

**Company/Office Information:** \_\_\_\_\_

\_\_\_\_\_  
 Company/Office Name Office ID (If Office is already a member)

\_\_\_\_\_  
 Street Mailing Address City State Zip

\_\_\_\_\_  
 Office Phone Office Fax

\_\_\_\_\_  
 Office Email – General email address for Company Office Web Address

**Preferred Mailing:** \_\_\_ Office \_\_\_ Home **Preferred Published Contact Phone:** \_\_\_ Office \_\_\_ Home \_\_\_ Cell

*\* By signing up for membership and/or subscription to our online services, you acknowledge and agree to the use of multi-factor authentication (MFA) as an additional layer of security. MFA helps protect your account by requiring multiple forms of verification, such as a password and a unique code sent to your phone or email. All personal information collected for MFA purposes will be handled securely, in compliance with all state and federal laws/regulations and used solely for authentication. We value your privacy and are committed to safeguarding your data.*

Submit completed application to [Membership@HGAR.com](mailto:Membership@HGAR.com) OR Fax to 914-681-6044  
 OR Mail to HGAR, One Maple Avenue, 3rd Floor, White Plains, NY 10605

|  |
|--|
| <b>Office Use</b><br>Member #: _ _ _ _ _ |
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**I UNDERSTAND AND AGREE TO THE FOLLOWING APPLICATION AND APPROVAL PROCEDURES:**

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

I agree to attend a 3 1/2 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 Processing 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 my Processing Fee of \$100 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 number, 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 Processing Fee \$100.00 and Annual Dues \$ \_\_\_\_\_ in the

total amount of \$ \_\_\_\_\_

Effective Date \_\_\_\_\_ / \_\_\_\_\_  
MONTH / YEAR

**Applicant:** \_\_\_\_\_

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

**BY SIGNING THIS APPLICATION, I ATTEST THAT ALL INFORMATION IS COMPLETE AND ACCURATE**

Submit completed application to [Membership@HGAR.com](mailto:Membership@HGAR.com) OR Fax to 914-681-6044  
OR Mail to HGAR, One Maple Avenue, 3rd Floor, White Plains, NY 10605



|                                       |
|---------------------------------------|
| <b>OFFICE USE</b><br>Member ID: _____ |
|---------------------------------------|

\_\_\_\_ 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. Failure to complete this orientation will suspend my Membership until it is completed.

- This course will satisfy the National Association of REALTORS® (NAR) Mandated Code of Ethics requirement (Period: Jan 1, 2022 – Dec 31, 2024).
- This course meets the NY Department of State (DOS) requirement of 2.5 hours of ethical business practices.
- You will earn a total of 3 hours towards the (DOS) 22.5 hours of continuing education requirement.

***Until further notice, our orientations are being held virtually via Zoom unless otherwise stated. Registrants will receive the zoom link the business day before the class.***

Our New Member Orientation classes fill quickly. Please select a 1st and 2nd date of choice (Enter 1 or 2 next to your two dates of choice) from the list below

- |                           |                    |
|---------------------------|--------------------|
| ____ May 7, 2024 – Tues   | 1:00 PM to 4:30 PM |
| ____ May 16, 2024 - Thurs | 6:00 PM to 9:30 PM |
| ____ June 3, 2024 - Mon   | 1:00 PM to 4:30 PM |
| ____ June 18, 2024 - Tues | 1:00 PM to 4:30 PM |

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| <p><b>*As a reminder, this course is a requirement for membership in the Hudson Gateway Association of Realtors. Failure to attend the HGAR New Member Orientation within 30 days will result in the suspension of Membership and access to OneKey® MLS.</b></p> |
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\_\_\_\_ I understand that you will try to accommodate me and register me for my 1st date of choice. If that class is full, you will register me on the 2nd date of choice. I will be informed of my New Member Orientation date in my welcome email.

Print Name: \_\_\_\_\_

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

Registration is done during the application processing. All other inquiries email [CE@HGAR.com](mailto:CE@HGAR.com)

Email to [Support@HGAR.com](mailto:Support@HGAR.com) OR Fax to 914-681-6044



**Supplement to Membership Application for Principal Broker/Designated Realtor Membership**  
(NOT required to be completed by Associate Brokers or Salespersons)

Below or attached is a list of ALL licensees affiliated with my office. I understand that these licensees must show proof of Realtor membership or join the Association within ten (10 days) from my acceptance to the Association. If not, I will be charged the non-member rate per licensee in accordance with the HGAR By-laws.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(To be verified at time of processing)

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.

**Additionally, 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.

**Additionally, 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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**ANNUAL DUES SCHEDULE – 2024**

**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). Primary REALTOR® Membership applicants must pay a processing fee and membership dues when they file their application. The processing 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 Association of REALTORS® and who pay State and National Association assessments through that association. A letter in Good Standing from the primary association must accompany the application when applying for Secondary Membership. Local dues only, processing fee waived.

**NEW MEMBER PRORATION SCHEDULE**

Membership dues are paid yearly at \$581.00. 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 applying 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, PLUS a \$100 late fee.**
- **Rejoining any time after a 1-year lapse in Membership; Prorated Dues, PLUS \$100 Processing Fee are due at time of rejoining.**

| Join Month     | HGAR Local Dues                | +NAR National Dues             | +NYSAR State Dues              | = | Sub Total | + Processing Fee | TOTAL DUE       |
|----------------|--------------------------------|--------------------------------|--------------------------------|---|-----------|------------------|-----------------|
| December 2023  | \$20.50 +<br>\$260.00 For 2024 | \$57.50 +<br>\$201.00 For 2024 | \$10.00 +<br>\$120.00 For 2024 | = | \$669.00  | + \$100          | <b>\$769.00</b> |
| January 2024   | \$238.00                       | \$188.00                       | \$110.00                       | = | \$536.00  | + \$100          | <b>\$636.00</b> |
| February 2024  | \$217.00                       | \$175.00                       | \$100.00                       | = | \$492.00  | + \$100          | <b>\$592.00</b> |
| March 2024     | \$195.00                       | \$162.00                       | \$90.00                        | = | \$447.00  | + \$100          | <b>\$547.00</b> |
| April 2024     | \$173.00                       | \$149.00                       | \$80.00                        | = | \$402.00  | + \$100          | <b>\$502.00</b> |
| May 2024       | \$152.00                       | \$136.00                       | \$70.00                        | = | \$358.00  | + \$100          | <b>\$458.00</b> |
| June 2024      | \$130.00                       | \$123.00                       | \$60.00                        | = | \$313.00  | + \$100          | <b>\$413.00</b> |
| July 2024      | \$108.00                       | \$110.00                       | \$50.00                        | = | \$268.00  | + \$100          | <b>\$368.00</b> |
| August 2024    | \$87.00                        | \$97.00                        | \$40.00                        | = | \$224.00  | + \$100          | <b>\$324.00</b> |
| September 2024 | \$65.00                        | \$84.00                        | \$30.00                        | = | \$179.00  | + \$100          | <b>\$279.00</b> |
| October 2024   | \$43.00                        | \$71.00                        | \$20.00                        | = | \$134.00  | + \$100          | <b>\$234.00</b> |
| November 2024  | \$22.00                        | \$58.00                        | \$10.00                        | = | \$90.00   | + \$100          | <b>\$190.00</b> |
| December 2024  |                                |                                |                                |   |           |                  |                 |

**MEMBERSHIP APPLICATION PAYMENT INFORMATION**

**Primary Membership**       **Secondary Membership**  
Local Dues Only

**Applicant Name:** \_\_\_\_\_

**Effective Date:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
Month      Year

**Processing Fee:**      **PLEASE PRINT**      \$100.00  
 + \_\_\_\_\_

**Dues (Local+State+National):**      \$ \_\_\_\_\_  
 + \_\_\_\_\_

**Total Payable HGAR: =**      \$ \_\_\_\_\_  
(Correct Payment amount MUST be entered to process)

***REALTOR dues are not refundable***

|   |
|---|
| <b>Office Use</b> <input type="checkbox"/> <b>N</b> <input type="checkbox"/> <b>PR</b> <input type="checkbox"/> <b>1YL</b><br>Member #:    ____ ____ ____ ____ ____ |
|---|

Check Enclosed #: \_\_\_\_\_       Charge to my VISA, MasterCard, Discover, or American Express account:

**Card #:** \_\_\_\_\_

**CVC:** \_\_\_\_\_      **Card Exp. Date:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
(3 or 4-digit number)

**Card Holder Signature:** \_\_\_\_\_

**Print Name:** \_\_\_\_\_      **Date:** \_\_\_\_\_

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