



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 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 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.*

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 OR Mail to HGAR, One Maple Avenue, 3rd Floor, White Plains, NY 10605

Office Use 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 OR Fax to 914-681-6044
OR Mail to HGAR, One Maple Avenue, 3rd Floor, White Plains, NY 10605



OFFICE USE

Member ID: _____

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. 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, 2025 – Dec 31, 2027).
- 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

- | | |
|-----------------------|--------------------|
| ___ 1/22/2025 - Wed | 6:00 pm to 9:30 pm |
| ___ 2/2/2025 - Sun | 9:30 am to 1:00 pm |
| ___ 2/18/2025 - Tues | 6:00 pm to 9:30 pm |
| ___ 3/6/2025 - Thurs | 9:30 am to 1:00 pm |
| ___ 3/19/2025 - Wed | 6:00 pm to 9:30 pm |
| ___ 4/5/2025 - Sat | 9:30 am to 1:00 pm |
| ___ 4/28/2025 - Mon | 6:00 pm to 9:30 pm |
| ___ 5/6/2025 - Tues | 9:30 am to 1:00 pm |
| ___ 5/28/2025 - Wed | 6:00 pm to 9:30 pm |
| ___ 6/7/2025 - Sat | 9:30 am to 1:00 pm |
| ___ 6/26/2025 - Thurs | 6:00 pm to 9:30 pm |

***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.**

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
Email to Support@HGAR.com OR Fax to 914-681-6044

SUBSCRIBER APPLICATION (Licensee; Associate Broker, Salesperson)

- Your office must be a Participant in OneKey® MLS before you can subscribe
- There is a yearly MLS Licensee fee for all Sales Associates/Associate Brokers.
- There is a Subscriber Start-up Fee of \$200.00
- Upon termination from MLS for any reason, I understand that payment of MLS Fees is **non-refundable**.
- Please enclose a copy of your current NY State Real Estate License

DO NOT SHARE YOUR MLS ID# AND/OR PASSWORD WITH ANYONE. The disclosure of the MLS ID# and/or Password to any person or entity would be a violation of the Subscriber Agreement and could result in termination of MLS Services.

I hereby apply for a subscription to OneKey® MLS.

I am a member of: Long Island Board of REALTORS®, Inc.,
 Hudson Gateway Association of REALTORS® or
 Other: _____

(If other please include a letter in Good Standing from Primary Association and provide your NRDS/M1 # _____)

Name: _____
(As appears on Real Estate License - First, Middle, Last)

Office Name: _____

Office Street Mailing Address _____ City _____ State _____ Zip _____

Home Mailing Address _____ City _____ State _____ Zip _____

*Email Address (REQUIRED): _____ Personal Web Address: _____

Office Ext #: _____ Home Phone #: _____ * Cell # (REQUIRED): _____

Preferred Mailing: ___ Office ___ Home **Preferred Contact Phone:** ___ Office ___ Home ___ Cell

Applicant Signature: _____ Date _____

** 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.*

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.

FOR OFFICE USE ONLY: Member #: _____ Office #: _____ Payment Amount: _____ Date: _____



