

**5.1.1.4 LIFE MEMBERSHIP NOMINATION REQUEST**

A "Life Member" is defined in the Bylaws of the Reno/Sparks Association of REALTORS® (Article IV, Sec. 1) as follows:

*"Life members shall have been REALTORS® members for not less than twenty-five (25) cumulative years and have performed notable service for the real estate profession, the community, and for the Association. Twenty of the twenty-five cumulative years must be as a member of the Reno/Sparks Association of REALTORS®. Nomination of Life Members shall be by the Executive Committee with final selection by a majority vote of the Board of Directors."*

Regarding Waiver of annual membership dues (Article VI, Sec.12):

*"Waiver of local dues for life members shall occur only after the member has reached the age of 65 or has experienced a permanent health disability Payment of national and state dues remain the responsibility of the Life Member."*

Members who have been granted Life Membership prior to 12/31/04, shall be grandfathered in with a full dues waiver of state, local and national dues.

Notable service shall be defined as a minimum ten years involvement – including but not limited to participating on a Reno/Sparks Association of REALTORS® committee, Nevada Association of REALTORS® committee or National Association of REALTORS® committee or holding an officer or director position in Reno/Sparks Association of REALTORS®, Nevada Association of REALTORS® or National Association of REALTORS®. Further, two of the ten years may be satisfied by active community service.

**Dear Executive Committee:**

Please accept this application as my request to be nominated for Life Membership in the Reno/Sparks Association of REALTORS®. I understand that I must meet the requirements outlined in the bylaws to qualify for the honor. I also understand that two letters of recommendation from current members must accompany this request.

Name \_\_\_\_\_ Member Since: \_\_\_\_\_  
Local Dues Waiver Requested: \_\_\_\_\_ Yes, I am at least 65 years old.  
\_\_\_\_\_ Yes, I have a permanent health disability.  
\_\_\_\_\_ No, I am requesting the title only at this time.

**Service Given to the Association:**

National Association: \_\_\_\_\_

Nevada Association: \_\_\_\_\_

Local Association: \_\_\_\_\_

Community Service: \_\_\_\_\_

I have held membership in the REALTORS® organization for a minimum of twenty-five cumulative years and twenty of the twenty-five years in the Reno/Sparks Association of REALTORS®. I understand that this nomination must be approved by the Executive Committee and confirmed by the Board of Directors. If requested, I will provide further documentation to verify the information above.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Approved by Bylaws & Policy: 8/26/08

Approved by Board of Directors: 8/28/08