

**Greater Augusta Association of REALTORS® - Multiple Listing Service**

**APPLICATION FOR PARTICIPATION IN  
A BOARD-OWEND MLS**

**SECTION I**

TO: The Greater Augusta Association of REALTORS®, Inc.-Multiple Listing Service.  
I, \_\_\_\_\_ hereby apply for  
Participation in the above named MLS and has enclosed my check in the amount of  
**\$500.00**,

As an initiation fee. I agree as a condition of participation to complete the indoctrination course of the above named MLS, if any, and otherwise on my own initiative to thoroughly familiarize myself with the MLS Rules and Regulations, including the duty to arbitrate business disputes pursuant to the arbitration procedures of the Greater Augusta Association of REALTORS®, Inc.

I agree to complete satisfactorily a reasonable and nondiscriminatory written examination covering such Rules and Regulations, and duty to arbitrate, and further agree that my act of paying MLS fees and aforementioned Rules and Regulations, and duty to arbitrate, all as from time to time amended. I consent and authorize the Board, through its Membership Committee and Board of Directors, to invite and receive information and comment about me from any member or other person, and I agree that any information and comment furnished to the board by any member or other person in response to any such invitation shall be conclusively deemed to be privileged and not form the basis of any action by me for slander, libel or defamation of character.

Finally, I agree that, if accepted for participation in the MLS, I shall pay the fees and dues as from time to time establish, and I further acknowledge and agree that I am responsible for compliance with the MLS Rules and Regulations for all persons affiliated with my firm who utilize the service.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Type or Print Signature

**SECTION II**

Broker  
Name \_\_\_\_\_

NAME OF  
FIRM \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_

ZIP CODE \_\_\_\_\_ EMAIL ADDRESS \_\_\_\_\_

OFFICE PHONE \_\_\_\_\_

OFFICE FAX \_\_\_\_\_

PRICIPAL BROKER \_\_\_\_\_  
LICENSE NUM. \_\_\_\_\_

SOCIAL SECURITY  
NUMBER \_\_\_\_\_

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

NUMBER OF LICENSED ASSOCIATIES \_\_\_\_\_

DATE STARTED BUSINESS IN GA/SC \_\_\_\_\_ INC.

YES \_\_\_\_\_ NO \_\_\_\_\_

OFFICERS/OWNER

NAME \_\_\_\_\_ TITLE \_\_\_\_\_

NAME \_\_\_\_\_ TITLE \_\_\_\_\_

NAME \_\_\_\_\_ TITLE \_\_\_\_\_

NAME \_\_\_\_\_ TITLE \_\_\_\_\_

CREDIT REFERENCES

BANK \_\_\_\_\_ ADDRESS \_\_\_\_\_

OTHER \_\_\_\_\_ ADDRESS \_\_\_\_\_

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The Applicant is in good standing with the Georgia/South Carolina Real Estate Commission and agrees to abide by the Rules and Regulations of the Greater Augusta Association of REALTORS®, Multiple Listing Service.

\_\_\_\_\_  
Applicant's signature