



GREATER McALLEN ASSOCIATION OF REALTORS®

Internet Access Authorization Form

(Please print clearly)

Office Name: _____

Office Phone #: _____ Office Fax #: _____

Office Address: _____

Agent Name: (First & Last): _____

Password: _____ (Note: This is Case Sensitive)

Preferred User E-mail Address: _____

Phone Number You Want to Appear in Navica: _____

Opt-in for Text Messages: Yes No – Cell Phone Number _____

Cell Phone Service Provider _____

____ I hereby consent to receive text messages and emails sent from the Greater McAllen Association of REALTORS® to my cell phone and email address as set forth above. I do acknowledge that I will be receiving email notifications regarding Annual Dues and Quarterly MLS Invoices, as applicable.

Signature: _____ Date: _____

Action Requested:

- Add
- Delete
- Change: (please signify change) _____

Access Level:

- REALTOR® Assistant for _____
- Appraiser Office Staff
- Board Staff Affiliate

I acknowledge that the Logon Name and Password that are assigned to me are unique and highly confidential. I agree that I will keep the Logon Name and Password confidential and that I will not share them with, or otherwise disclose them to, any other person (including another Broker with my firm), nor will I allow another person to access the MLS using my Logon Name and Password. I acknowledge that, upon breach of this nondisclosure obligation, the Greater McAllen Association of REALTORS® will have the right to terminate my MLS access/privileges. Please include a copy of your driver's license when submitting this form.

Agent/Staff-Personal Assistant Signature

Date

Broker Signature

Date

GMAR Member Services Coordinator Signature

Date