



**APPLICATION FOR MULTIPLE LISTING SERVICE
MEMBERSHIP**

DATE: _____ **NRDS:** _____

Name: _____

Address: _____

City, State & Zip: _____

Mailing Address: _____

City, State & Zip: _____

Cell Phone: _____ **Alt Phone:** _____

Fax: _____

Email: _____

S.S. # _____

D.O.B. _____

License # _____ **Broker** **Salesman**

Name as shown on License: _____

Name as you want it to appear on roster: _____

Current Office: _____

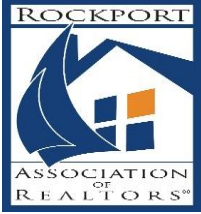
Office Address: _____

City, State & Zip _____

Office Phone: _____

Office Fax: _____

Broker: _____



**APPLICATION FOR MULTIPLE LISTING SERVICE
MEMBERSHIP**

To: **Rockport Area Association of Realtors®**

I, _____ hereby apply for Multiple Listing Service membership in the following category:

- Realtor Broker Affiliate Appraiser

In the above-named Board, and enclose my check in the amount of \$_____. I agree to follow the rules & regulations of the Multiple Listing Service for the above-mentioned board.

NOTE: Applicant acknowledges that if accepted as a Member and he/she subsequently resigns or is expelled from membership in the Board with the ethics complaint or arbitration request pending, the Board of Directors may condition renewal of membership upon applicant's verification that he/she will submit to the pending ethics or arbitration proceeding and will abide by the decision of the Hearing panel; or if applicant resigns or is expelled from membership without having complied with an award in arbitration, the Board of Directors may condition renewal of membership upon his/her payment of the award, plus any costs that have previously been established as due and payable in relation thereto, provided that the award and such costs have not, in the interim, been otherwise satisfied.

Present Board Affiliation

Have you participated in a Multiple Listing Service? Yes No

If "yes", where _____

Have you ever been refused membership in any other real estate board or MLS service?

- Yes No

If "yes", state basis for each such refusal and detail the circumstances related thereto:

Do you hold, or have you ever held, a real estate license in any other state? If so, specify: _____

Has your real estate license, in this or any other state, been suspended or revoked?

Yes No

*If "yes", specify the place(s) and date(s) of such action, and detail the circumstances relating thereto:

Are there now, or have there been within the past five years, any complaints against you?

Yes No

*If "yes", specify the substance of each complaint in each state, the agency before which complaint was made, and the current status or resolution of such complaint.

Have you ever been convicted of a felony? Yes No

If so, give details: _____

PERSONAL DATA

(To be answered by Applicant for MLS Membership)

Name as shown on License _____

License No. _____ Broker Salesman

Name as you want it to appear in the roster _____

Nickname _____ Social Security Number _____ - _____ - _____

Place of birth _____

Date of Birth _____

Home address: _____ (Phone) _____

(Fax) _____ *

Mailing address: _____

Office address: _____

(Phone) _____ (Fax) _____

(E-mail) _____

Check whether:

Individual DBA Partnership Corporate Affiliate

State position with firm:

Principle Partner Corporate Officer Employee Independent Contractor
 Other

If "Other" explain: _____

How many years have you been active as Salesman? Broker Other

First licensed in this State _____, 201__, and continuously licensed since _____, 201__.

Established in present location _____, _____.

Previous location _____

Resident here since _____, _____.

Previous residence _____

Are you a member of any other real estate board whether or not affiliated with the NATIONAL ASSOCIATION OF REALTORS? Yes No

*If "yes", name each other such Board, type of membership held, and dates establishing the time period for which membership is held.

Have you previously held membership in any other real estate board or MLS service?

Yes No

*If "yes", name each such Board, type of membership held, and dates establishing the time period for which membership was held.

Are you actively engaged in the real estate business? Yes No

You are authorized to refer to the following members of this Board who know me:

NOTE: Applicant acknowledges that the Board requires a 30 day written notice to resign from the Association.

***By providing your fax number and signature on this form, you are agreeing to receive Rockport Area Association of REALTORS® event notices and forms, or member information and advertising from the Rockport Area Association of REALTORS® that may be of interest to you by fax. In accordance with the Rockport Area Association of REALTORS® privacy commitment, RAAR will not share this information or use it for any other purpose.**

I hereby certify that the foregoing information furnished by me is true and correct, and I agree that failure to provide complete and accurate information as requested, or any misstatement of fact shall be grounds for revocation of my membership if granted.

I agree that I shall pay the fees established by the Board relating to MLS.

Date

Signed

*Attach separate sheet(s) as required.

(PLEASE ATTACH A COPY OF YOUR LICENSE)