CAROLINA SMOKIES ASSOCIATION OF REALTORS®, INC.

APPLICATION FOR MLS MEMBERSHIP

(NEW OFFICE)

(For MLS access by REALTOR® (principals) or a firm comprised of REALTOR® (principals) who are not members of the Carolina Smokies Association of REALTORS®.)

I hereby apply for approval of MLS Only membership of the real estate office known as_

	in the Carolina	a Smokies Association	of REALTORS®' M	ultiple Listing
Service. I am enclosing my check for a new of event of non-approval. In the event of approv OF REALTORS®. I consent that the Carolina Sotherwise, may invite and receive information agree that any information and comment furnisconclusively deemed to be privileged and not ficharacter.	al, I agree to abide to Smokies Association of and comment about shed to the Board by	by the Code of Ethics of REALTORS®, throume from any member any person in respon	of the NATIONAL A ugh its MLS Commit r or other person, a nse to the invitation	SSOCIATION tee or nd I further shall be
I hereby submit the following information for y	our consideration:			
Broker of Record: Name as shown on Real Estate License:	Miss	Mrs	Mr.	
Office Name				
Does your office comply with zoning requireme Office Address:				
Phone:	Fax:			
Mailing Address:				
Email Address:				
Check whether: Individual,	DBA,	Partner,	Corp.	
Partners, or Officers (if a Corp.):				



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Names of other agents who will be registered with this office
Name of primary REALTOR® Board or Association:
Note: Your Primary Board of REALTORS® is the one through which your State and National Association of REALTORS® yearly dues are paid.
Dated:, 20 Signed:
Type or Print Name: