

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 Smokies Association of REALTORS®' Multiple Listing
Service. I am enclosing my check for a new office fee in the amount of \$500.00, which is to be returned to me in the
event of non-approval. In the event of approval, I agree to abide by the Code of Ethics of the NATIONAL ASSOCIATION OF REALTORS®. I consent that the Carolina Smokies Association of REALTORS®, through its MLS Committee or
otherwise, may invite and receive information and comment about me from any member or other person, and I further
agree that any information and comment furnished to the Board by any person in response to the 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.
I hereby submit the following information for your consideration:
Name as shown on Real Estate License:
value as shown on Real Estate License.
Miss Mrs Mr
Office Name
Corporate License #
Office Address:
Phone: Fax:
Mailing Address:
Email Address:
Check whether: Individual, DBA, Partner, Corp.
Partners, or Officers (if a Corp.):



131 Heritage Hollow Dr. Franklin, NC 28734

PHONE (828) 524-1179 FAX (828) 524-8839

E-MAIL ae@carolinasmokiesrealtors.com WEB SITE carolinasmokiesrealtors.com

Names of other agents	s who will be registered	vith this office	
Name of primary REAL	.TOR® Board or Associa	ion:	
Note: Your Primary Boyearly dues are paid.	pard of REALTORS® is t	ne one through which your State	e and National Association of REALTORS®
Dated:	, 20	Signed:	
	Type	or Print Name:	