



APPLICATION FOR MLS PARTICIPATION (Individual)

(Individual whose office has been approved for MLS Only Membership, or is being approved.)

My primary BOARD OF REALTORS membership, through which my dues are paid to the NATIONAL ASSOCIATION OF REALTORS and the NORTH CAROLINA ASSOCIATION OF REALTORS, is:

Your name, as shown on Real Estate License:

_____ Miss _____ Mrs. _____ Mr. _____

License No. _____ Broker _____ Salesman

Office Name: _____

Office Address: _____

Name of Broker In Charge _____

Mailing Address (if different from above): _____

Phone: _____ Fax: _____

Email: _____ Cell: _____

My title or position with the firm: _____

Residence Address: _____

Phone: _____



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 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: _____

Signature of Broker in Charge of Office _____