

## ADD MEMBER FORM



(Add new member to existing office)

| MEMBER INFORMATION:  |  |
|--|--|
| Name (As it appears on License):   | Nickname:  |
| Member NRDS ID:  | Member MREC License #  |
| Member type: (please circle)   | R DR Appraiser Assistant   |
| Home Address:  | City/State/Zip:  |
| Cell Phone: Office Phone:  | Email:   |
| Primary Association I  | Previous SOMO MLS User: YesNo (check one)  |
| (If previous user) When  | What Board   |
| Will you be working with an agent or team within   | the office that holds you license? YesNo (check one)   |
| Which will you be with Four Corners Realtors? (cin<br>OFFICE INFORMATION:  | rcle one) Primary Secondary MLS Only   |
|  | Brokerage MREC License #   |
|  | Designated Broker Name:  |
| and other obligations of participation including payme<br>including the obligation to submit to ethics hearings ar<br>accordance with the established procedures of the Boa<br>SOMO MLS Rules and Regulations may result in termin | e SOMO MLS to abide by the Bylaws, Rules and Regulations of the Servi<br>ent of fees. I further agree to be bound by the NAR® Code of Ethics<br>and the duty to arbitrate contractual disputes with other REALTORS® in<br>ard/Association. I understand that a violation of the Code of Ethics or<br>nation of my MLS privileges and that may be assessed an administrative<br>in to any discipline, including fines, that may be imposed. |
| I agree to complete SOMO MLS Orientation, as re  | quired once access is granted to the MLS system.   |
| ** NOTE Fees are Non-Refur   | ndable and Non-Transferrable   |
| Signature  | Date:  |
| Broker Signature   |  |
| Please do not fill ou  | ut anything below this line, office use only   |
| SOMO MLS train   | ning completed//   |
| Date Access  | s Granted//  |
|  |  |
| AE Signature   |  |