

Multilist Services of Springfield REALTORS®, INC. 1310 E. Primrose St., Springfield MO 65804 Office (417) 883-1226 Fax (417) 520-0977 Email: support@gsbor.com

MULTILIST ACCESS APPLICATION

PERSONAL INFORMATION

Broker Signature: _____

PERSONAL INF	ORMATION
Name (As it appears	s on license):
Nickname:	Date of Birth:
Home Address:	
	State: Zip Code:
Cell Phone:	Home Phone:
E-Mail Address:	Web Site:
Individual License/W	/ork Permit#:
Classification:	EALTOR® (\$47.50) Appraiser (\$47.50) Unlicensed Assistant (\$27.50)
Will you primarily be	working with an agent or team within the office that holds your license?
If yes, prov	ide the name of agent you willbe assisting:
Primary Board of RE	ALTORS®:
OFFICE INFORM	
Office Name:	Branch:
Office NRDS#:	
Office License #:	
Designated Broker N	lame:
of participation including pa hearings and the duty to ari the Code of Ethics may resu to any discipline, including fi I irrevocably waive all claim	on of participation in the Multilist Service of Springfield REALTORS®, Inc., to abide by the Bylaws, Rules and Regulations of the Service, and other obligations by ment of fees. I further agree to be bound by the NATIONAL ASSOCIATION OF REALTORS® Code of Ethics including the obligation to submit to ethics bitrate contractual disputes with other REALTORS® in accordance with the established procedures of the Board/Association. I understand that a violation of all in termination of my MLS privileges and that I may be assessed an administrative processing fee of up to two hundred fifty (\$250), which may be in addition nes, that may be imposed. Is against the Multilist Service or any of its officers, directors, staff, or members for any act in connection with business of the Multilist Service and particularly ing or failure to elect, advancing, suspending, expelling, or otherwise disciplining me as an applicant or as a member.
	NOTE: Fees are Non-Refundable and Non-Transferrable
Date:	Signature: