



North Office
5605 Valley Belt Road
Independence, OH 44131

South Office
7110 Whipple Ave NW #D102
North Canton, OH 44720

Phone: (216) 485-4100
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Email: membership@mlsnow.com

**Guernsey-Muskingum Valley Association of REALTORS®
Broker REALTOR® Application for Participation**

Is this a Main Office or a Branch Office?

Main

Branch

(If only office with MLS, always check Main)

As the undersigned, a Primary REALTOR® Member of the _____ Association/Board of REALTORS® since [year] _____, I hereby request participation in MLS Now.

My signature below certifies that I have read and understand the Rules & Regulations of MLS Now and hereby agree to abide by these and other Rules, Regulations, and Bylaws as may be adopted from time to time by the Board of Directors.

I irrevocably waive all claims against MLS Now and its' participating Boards or any of their officers, directors, members, employees, or participants as to their acts in denying participation or suspending, expelling, or otherwise disciplining me as a participant.

APPLICATION PROCESS

Upon receipt and board approval of your application, your office and agent information will be entered into the MLS Now database. You will be sent an email with further instructions for MLS Now's online access at that time.

LISTINGS

Once your office and agent information has been updated in our online system, your listings can be entered into the Service. MLS Now can enter your listings for a fee before you attend the required Introduction to MLS and Listing Input classes. If you were previously with a broker who was already a participant of MLS Now and you have listing input capability, you may enter your listings in accordance with MLS Now's Rules and Regulations. Any required listings obtained before your acceptance date must be entered within 48 hours of that date. Listings obtained on or after your acceptance date must be entered into the Service within 48 hours of the listing date.

Firm Name: _____

Firm Phone Number: _____ Firm Fax Number: _____

Firm Street Address: _____ City: _____ State: _____ Zip Code: _____

County: _____ Secondary board/association affiliations: _____

Firm e-mail and web address (required): _____

AUTHORIZATION

By the act of submission of any property listing data to the Service, the Participant represents that he/she has been authorized to grant and does grant authority to the MLS for the Service to include the property listing data in its copyrighted compilation and in any statistical report on "Comparable." Listing content includes, but is not limited to, photographs, images, graphics, audio, and video recordings, virtual tours, drawings, descriptions, remarks, narratives, pricing information, and other details or information related to the listed property. **Initial:** _____

COPYRIGHT

All rights, title, and interest in each copy of every Service compilation created and copyrighted by the Service, and in the copyrights therein, shall at all times remain vested in the Service. **Initial:** _____

Broker's Name: _____ Date: _____
Please Print

Broker's Signature: _____

Office Manager: _____
Please Print

BOARD/ASSOCIATION USE
<p>I hereby certify that the above REALTOR® is a member in good standing with the _____ Board/Association of REALTORS®.</p> <p>Signature: _____ Date: _____</p>

Sales Associates Information

IF MORE SPACE IS NEEDED, PLEASE MAKE COPIES OF THIS PAGE

List all licensed brokers and sales associates below.

(This first entry is for the primary broker's information)

Name: _____ License #: _____ Preferred Phone #: _____

Internet E-mail Address (required): _____ Primary Board/Association: _____

Do you authorize this agent or support to have listing input capabilities: YES NO

If yes... Entire Office? Only their own listings?

(Listing input capability will not be given to agent or support staff people that have not taken the required listing input class.)

Name: _____ License #: _____ Preferred Phone #: _____

Internet E-mail Address (required): _____ Primary Board/Association: _____

Do you authorize this agent or support to have listing input capabilities: YES NO

If yes... Entire Office? Only their own listings?

Name: _____ License #: _____ Preferred Phone #: _____

Internet E-mail Address (required): _____ Primary Board/Association: _____

Do you authorize this agent or support to have listing input capabilities: YES NO

If yes... Entire Office? Only their own listings?

Name: _____ License #: _____ Preferred Phone #: _____

Internet E-mail Address (required): _____ Primary Board/Association: _____

Do you authorize this agent or support to have listing input capabilities: YES NO

If yes... Entire Office? Only their own listings?

Name: _____ License #: _____ Preferred Phone #: _____

Internet E-mail Address (required): _____ Primary Board/Association: _____

Do you authorize this agent or support to have listing input capabilities: YES NO

If yes... Entire Office? Only their own listings?

Name: _____ License #: _____ Preferred Phone #: _____

Internet E-mail Address (required): _____ Primary Board/Association: _____

Do you authorize this agent or support to have listing input capabilities: YES NO

If yes... Entire Office? Only their own listings?
