

Completed application, payment and Letter of Good Standing if applicable must be emailed to membership@monmouthoceanrealtors.com

All fields are required and must be completed to be processed. The fillable fields are only active in Chrome and Firefox. If you use another Browser, print and fill out the form.

OFFICE APPLICATION

PLEASE CHECK ONE:

PRIMARY	BRANCH	BOARD	MLS*	
FIRM NAME(IF A DBA NEED TO HAV	E FULL NAME)			
ADDRESS				
CITY		_STATE		_ZIP
OFFICE PHONE	///	FAX		
NAME OF MANAG	ER			
OFFICE LICENSE N	IO			
LICENSE NO. OF THE LOC	CATION OF THE OFFI	ICE THAT IS APPLY	TNG FOR MEMBERSH	IP.
COUNTY		_		
BROKER OF RECO	RD			
BROKER LICENSE				
BROKER EMAIL _				
BROKER HOME AI	DDRESS			
CITY		ST.	ATE	ZIP
CELL NO. /	/			

* PLEASE NOTE THAT AN APPLICATION FOR MLS ONLY MUST INCLUDE A LETTER OF GOOD STANDING



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NEW MEMBER APPLICATION

NEW PRIMARY MEMBER
NEW SECONDARY MEMBER
MLS ONLY MEMBER

FIRST	MIDDLE	LAST
HOME ADDRESS		
	STATE	
COUNTY		
CELL#//	EMAIL	
RE LICENSE #		
DATE OF BIRTH	LANGUAGES SPOKEN	
NAME OF AGENCY OFFICE ADDRESS (LOCATION	_	DRKING OUT OF)
STREET	CITY _	ZIP
COUNTY		
OFFICE PHONE/_	/	
HAVE YOU HELD OR DO YOU HO	LD MEMBERSHIP WITH ANOTHE	R REALTOR BOARD/ASSOCIATION?
YES NO		
IF YES ENTER YOUR NRDS NUME	EER	
MEMBER SIGNATURE		DATE





Field of Business (Please choose your primary field of business)

General/Residential Sales (MOST COMMON)
New Homes
Buyer Brokerage
Vacation Rentals
Condominiums
Second Homes
Manufactured Homes
Timeshare Sales
Property Management
Land Sales/Leasing
General Commercial Sales/Leasing
Office Sales/Leasing
Residential Lots
Retail Sales Leasing
Association Executive
Volunteer
Other



NAME:	
Monmouth Ocean Regional R	EALTORS ® Association Membership
attend orientation and complete the or the NATIONAL ASSOCIATION OF REALTO provisional membership. Failure to mee membership terminated. I agree to about Rules & Regulations and the Code of ET and Multiple Listing Rules if applicable. the Association or any of its Officers, D with the business of the Association and	onmouth Ocean Regional REALTORS®. I will n-line New Member Code of Ethics Training of ORS® within 60 days of confirmation of et this requirement may result in having my ide by the Association's Constitution, By-Laws, THICS of the National Association of REALTORS® I hereby irrevocably waive any claims against irrectors or Members for any act in connection diparticularly as to its or their acts in electinging, expelling or otherwise disciplining me as an
(Date)	(Signature)
MOREML.	S Membership
Regulations of the MOREMLS. I hereby i Association or any of its Officers, Direct the business of the Association and part	NOREMLS and agree to abide by the Rules and arrevocably waive any claims against the cors or Members for any act in connection with cicularly as to its or their acts in electing or expelling or otherwise disciplining me as an ALS.
(Date)	(Signature)



Payment Information & Check List

Please include with your application

	Completed applications with <u>SIGNATURES</u>							
	Check, Money Order or Credit Card							
	A letter of good standing is required from your REALTOR® Board in you are only joining the MLS.							
Please	make checks payable	e to Monmouth	Ocean Region	al REALTORS®				
Name	·							
Credit	t Card Information:	VISA	MC	AMEX	DISC			
Card i	# /	/	/					
Exp. [Date:							
Amou	nt Paid: \$	Signat	ture:					

<u>MOTE</u>: All necessary paperwork (with signatures) along with your payment must be submitted together.

The omission of any documentation will delay the processing of your application.