REALTOR® ASSOCIATION OF SOUTHERN MINNESOTA

MLS-ONLY MEMBER APPLICATION
Agent Data Worksheet

Name:_____

       (Last Name)   (First Name)   (Middle Initial)

Home Address:_____

                 (Street)

City:_____ State:_____ Zip:_____

Preferred Phone: ☐ Home   ☐ Office   ☐ Cell:_____

Office Name:_____

Office Address:_____

                 (Street)

City:_____ State:_____ Zip:_____

Office Phone:_____

Preferred Mailing: ☐ Home   ☐ Office   Mail Publications to: ☐ Home   ☐ Office

Preferred E-mail Address:_____

Birth Date:_____/_____/_____

Real Estate License #_____ License Date:_____

Agent Designation(s): ☐ GRI ☐ CRS ☐ CRB ☐ ABR ☐ Other:_____ If you
are now or have been a REALTOR Member before, please provide your previous NAR Membership (NRDS)
number:_____

_____
Initial   I hereby certify that I am a member in good standing at my primary association. I certify that the above information furnished by me to the REALTOR® Association of Southern Minnesota is true and correct.

_____
Initial   I acknowledge that I have received a copy of the MLS rules and regulations and agree to abide by them.

MLS Security Agreement

Broker / Agent

MLS passwords are distributed exclusively to those brokers and their agents who are participants of the REALTOR® Association of Southern Minnesota MLS, and those REALTOR® agents associated with them. These passwords are **not** to be distributed, loaned, or given to any other individual. Violations of this policy are to be promptly reported to the MLS Committee in writing. Fines for giving out code words to **anyone** are:

1st Offense:	$500.00
2nd Offense:	$1,000.00
Subsequent Offenses:	**Subject to suspension or termination by the Board of Directors of the REALTOR® Association of Southern Minnesota.**

I agree to abide by the rules and regulations concerning MLS Passwords. I understand that if I violate this policy, I will be subject to the above listed fines.

Date:_____

Signature:_____

Company:_____

Authorization Level

Paragon

As Broker, I authorize that the following agent licensed with my firm be allowed Paragon access to perform the following functions.

☐   User has full access to system except Input/Maintenance functions and can perform a Firm Inventory of their own listings.

☐   User has full access to system and may access the Input/Maintenance functions for their own listings.

☐   User may enter and maintain any listings in their office and perform a Full Firm Inventory.

Agent Name:_____

Firm Name:_____

Broker Signature:_____

Date:_____