



**MID CAROLINA REGIONAL MLS**

140 Turner Street, Southern Pines, NC 28387

910-692-8988 Membership@MCRAR.com Accounting@mcrar.com

**Subscriber Application for Participation in the Multiple Listing Service**

I hereby apply to participate in the Mid Carolina Regional MLS, Inc. (MCRMLS).

I agree to abide by the National Association of REALTORS® (NAR) *Code of Ethics* and the MCRMLS *Bylaws* and the *Rules and Regulations*. I also agree to arbitrate business disputes with other Participants and Subscribers through the Mid Carolina Regional Association of REALTORS® (MCRAOR) *Professional Standards* process.

I understand that providing my mailing address, email address, telephone number and fax number I consent to receive communications sent by or on behalf of MCRMLS and its subsidiaries and affiliates via regular mail, email, telephone or fax or text.

By submitting this application, I acknowledge and/or certify that:

- All changes to my contact information, including my company name, address and/or telephone number will be reported in writing to MCRMLS within ten (10) working days.
- All information contained herein is true and accurate to the best of my knowledge.

Subscriber's Name *(as shown on license)*: \_\_\_\_\_ Nick Name: \_\_\_\_\_

Subscriber's NC Real Estate License #: \_\_\_\_\_ Subscriber is a [ ] Broker [ ] Provisional Broker

Subscriber's Home Address: \_\_\_\_\_  
*(City, State ZIP Code)*

Subscriber's Cell Phone #: \_\_\_\_\_ Cell Phone Provider: \_\_\_\_\_

Subscriber's Firm Name \_\_\_\_\_ Subscriber's Email: \_\_\_\_\_

\*Subscriber's Primary Association of REALTORS® \_\_\_\_\_

I request my Supra eKey be co-operated eKey Serial # \_\_\_\_\_ PIN: \_\_\_\_\_

\_\_\_\_\_  
Subscriber Signature Date

\_\_\_\_\_  
Participant REALTOR® Signature Date

**\* MCRAOR Association Subscribers must be a REALTOR® member of another Association.**