

MLS PARTICIPATION AGREEMENT

For MLS Access by REALTOR® Principals or a firm comprised of REALTOR® Principals who are not members of the REALTOR® Association of Southern Kentucky, Inc.

Name: \_\_\_\_\_

Office: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Number of total licensees affiliated with firm: \_\_\_\_\_

Names of licensees participating: \_\_\_\_\_

\_\_\_\_\_

Primary Association: \_\_\_\_\_

**Please provide a "Letter of Good Standing" from your Primary Association**

It is understood that my subscription to the MLS is an individual subscription and not a corporate subscription. Furthermore, my login and password are not to be shared with any other individual, office, or firm. I agree as a condition of participation in the MLS to abide by all relevant Bylaws, Rules and other obligations of participation, including payment of fees. I further agree to be bound by the Code of Ethics on the same terms and conditions as association members as established in the Code of Ethics and Arbitration Manual, including the obligation to submit to ethics hearings and the duty to arbitrate contractual and specific non-contractual disputes with other REALTORS® in accordance with the established procedures of the association. I understand that a violation of the Code of Ethics may result in suspension or termination of my MLS rights and privileges and that I may be assessed an administrative processing fee not to exceed \$500 which may be in addition to any discipline, including fines, that may be imposed. I understand that fees assessed are based on the number of licensees affiliated with my firm that will have access to or use of the system. I have enclosed my application fee of \$180 per the number of licensees affiliated with my firm wishing to participate.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

# MLS PARTICIPANT INFORMATION FORM

Last 4 digits of Social Security Number: \_\_\_\_\_

Name: \_\_\_\_\_  
FIRST MIDDLE LAST

Name as you would like it to appear in MLS/Paragon: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Delivery Address (if different from Mailing Address): \_\_\_\_\_  
\_\_\_\_\_

Cell Phone#: \_\_\_\_\_

email: \_\_\_\_\_ Website: \_\_\_\_\_

Office Name: \_\_\_\_\_

Agents Birthday: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Spouses First Name: \_\_\_\_\_

State dues paid thru this Board (Y / N): \_\_\_\_\_ NRDS ID#: \_\_\_\_\_

List all Local/National MLS's you Participate in: \_\_\_\_\_  
\_\_\_\_\_

## FOR OFFICE USE ONLY

\_\_\_\_\_ Temporary Password will be emailed  
User Code Paragon/MLS Login Name/NRDS ID #

Agent Membership Status: **S** = MLS – Only Agent Type (circle one): DX = MLS Only Broker  
RX = MLS Only REALTOR®

Security Level (circle one): **3** = Agent  
**4** = Agent Input  
**5** = Broker, Office Manager or Office Staff

Primary State Association: \_\_\_\_\_ Date joined: \_\_\_\_/\_\_\_\_/\_\_\_\_

Code of Ethics Compliant? (Y / N) \_\_\_\_\_ Date Completed: \_\_\_\_/\_\_\_\_/\_\_\_\_

Agent Real Estate License No: \_\_\_\_\_ Date issued: \_\_\_\_/\_\_\_\_/\_\_\_\_

- |  |   |   |  |
|--|---|---|--|
| <input type="checkbox"/> LAMPS                   | <input type="checkbox"/> Paragon                    | <input type="checkbox"/> LAMPS/MLS Charge Setup | <input type="checkbox"/> email   |
| <input type="checkbox"/> Letter of Good Standing | <input type="checkbox"/> Approved by REIS BOD _____ |   |  |
| Payment:   | <input type="checkbox"/> Visa                       | <input type="checkbox"/> MasterCard             | <input type="checkbox"/> Discover <input type="checkbox"/> Check # _____ |