

**Administrative Membership Application—Licensed**

Access to the Service is contingent upon continued employment with an MLS Designated Realtor (Participant) or a Realtor who is licensed with an MLS Designated Realtor.

*Please Print Clearly*

OFFICE NAME \_\_\_\_\_ NJMLS OFFICE # \_\_\_\_\_

ADDRESS \_\_\_\_\_ COUNTY \_\_\_\_\_

TOWN \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ FAX \_\_\_\_\_

NAME OF APPLICANT \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_

TOWN \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

HOME PHONE \_\_\_\_\_ CELL PHONE \_\_\_\_\_

E-MAIL ADDRESS (required) \_\_\_\_\_

RE License # \_\_\_\_\_ Date Licensed \_\_\_\_\_ NRDS # \_\_\_\_\_

MEMBER OF REALTOR® BOARD \_\_\_\_\_

I am applying for Administrative Membership because I am (check one):

A **Licensed Administrative Assistant** — Has own login and password.

Please select Access level:  **Office-Wide Access**  **Company-Wide Access**

A **Licensed Personal Assistant** to:

Member Name: \_\_\_\_\_ Member Code: \_\_\_\_\_

Has the access of the member he/she is assisting. Has own login and password.

**If you are replacing an existing Administrative or Personal Assistant, please print the name of that person and we will terminate his/her membership.** \_\_\_\_\_

**FEES: Annual Membership Fee \$222.00** (first year—prorated monthly)

Your membership fee will be billed to your office and is effective the date your application is processed.

Once your application has been processed you will receive email confirmation with link to register for Orientation. This class is required in order to gain access to the system. **Classes are held in our Haworth and Lyndhurst offices and you must be pre-registered. No walk-ins please.**

The undersigned hereby makes application for MLS Administrative Membership in the New Jersey Multiple Listing Service, Inc. and agrees to abide by the By-Laws and the Rules and Regulations of the Service, which can be found at: [newjerseymls.com/rules](http://newjerseymls.com/rules)

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

Print Broker/Designated Realtor Name \_\_\_\_\_

Broker/DR Signature \_\_\_\_\_ Date \_\_\_\_\_

**Fax completed application to 201-387-6960 or email to membership@njmls.com**