

APPLICATION FOR SUBSCRIBER MEMBERSHIP IN THE GARDEN STATE MLS

I apply for SUBSCRIBER membership in the Garden State Multiple Service, LLC under the membership of my Designated REALTOR.

NOTE: The Designated REALTOR must be the first Member of an office joining.

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Office ID (4 or 6 numbers)

Office Name (please print) _____

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Main Office Phone (Do NOT use personal phone # at office)

Designated Realtor/Manager Name (please print) _____

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First Name (14 Letters)

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Last Name (18 Letters)

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Home Address (28 Characters)

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Home City (26 Characters)

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State

| | | | | |

Zip Code

| | | | | | | | | | | | | | | | | |

Agent Phone (include area code)

| | | | | | | | | | | | | | | | | |

Cell Phone (include area code)

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Personal Fax (include area code)

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NJ Real Estate License # (7 Numbers)

E-Mail address (50 characters - including @ symbol) Be sure to include domain (ie., @aol.com, @att.net, etc.) _____

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System Password (6-20 Letters and/or Numbers)

Primary or Resident Board/Association of Realtors _____

To the Garden State Multiple Listing Service, LLC, I have read my Designated REALTOR's copy and agree to abide by the Rules and Regulations of the Service and the By-Laws of the State and National Association as they now exist or may be hereafter amended, and I agree to adhere to the Code of Ethics of the NATIONAL ASSOCIATION of REALTORS, including the duty to arbitrate controversies arising out of real estate transactions as defined in the procedures of the NATIONAL ASSOCIATION of REALTORS arbitration manual. I further understand that my Designated REALTOR's Membership in the Garden State MLS is a requirement for me to be entitled to use the computerized programs of the service and to purchase products offered by the GSMLS. I understand that allowing someone who is not a Participant/Subscriber member or Service Recipient of this MLS to use my identification number or to use any listing book that I purchase from the GSMLS, is a severe violation of the Rules and Regulations, and may subject me to substantial fines and possible revocation of my privileges. Semi-Annual Dues: To Check to GSMLS in the amount of \$62.50. Send or deliver check with application to GSMLS, 1719 Route 10 East, Suite 223, Parsippany, NJ 07054. If paying with a credit card, you will be able to pay online after your application is processed.

Completed membership applications should be emailed to membership@gsmls.com, faxed to 973-984-1790 or mailed to GSMLS, 1719 Route 10 East, Suite 223, Parsippany, NJ 07054.

Signature of Applicant (Subscriber)

Signature of Office Manager or Designated REALTOR

A Public ID number will be assigned to you by GSMLS at the time this application is processed and your System Password (sometimes referred to as your Private ID) will be entered at that time.

Please have your Board of Realtors initial that you are a member in good standing _____