

GUAM ASSOCIATION OF REALTORS®

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MLS Subscriber Agreement

MLS Subscriber:		
Email Address:		Website:
Mailing Address:		
City:	State:	Zip Code:
Home Phone:		Cell Phone:
Real Estate License #:		License/Certified Appraiser:
Primary Board/Associatior	າ:	
Are you presently a memb	er of any other <i>i</i>	Association of REALTORS®? Yes No
If yes, name the Associatio	n and type of m	embership held:

I hereby certify that I have reviewed this application. I further agree that the above licensee is affiliated with my office. This authorizes his/her access to the Guam Association of REALTORS® Multiple Listing Service. Further, I understand that I am responsible for the agent's use or misuse of the service in accordance with the Rules and Regulations and payment of all fees associated with Multiple Listing Service membership.

I assign the following MLS Sponsor to co-list with the new subscriber until such time their application is approved by the Board of Directors of the Guam Association of REALTORS®.

MLS Sponsor:
MLS Participant (Print Name):
Office Name:
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Principal Broker/Designated REALTOR® Signature:

Date: _____