



# GUAM ASSOCIATION OF REALTORS®

*"Voice for Real Estate"*

153 Martyr Street, Suite 201, Hagatna, GU 96910

Office: (671) 477-4271 Fax: (671) 477-4275

Website: guamrealtors.com

---

## MLS Subscriber Agreement

MLS Subscriber: \_\_\_\_\_

Email Address: \_\_\_\_\_ Website: \_\_\_\_\_

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

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

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Real Estate License #: \_\_\_\_\_ License/Certified Appraiser: \_\_\_\_\_

Are you presently a member of any other Association of REALTORS®? Yes ☐ No ☐

If yes, name the Association and type of membership 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. Furthermore, 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:** \_\_\_\_\_

**Principal Broker/Designated REALTOR® Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_