

**ST. THOMAS BOARD OF REALTORS®**  
***MLS***  
**MEMBER APPLICATION PROCESS**

**APPLYING FOR MEMBERSHIP:**

1. The applicant must submit the **PROOF OF LICENSING, NAR NRDS NUMBER, COMPLETE MLS MEMBERSHIP APPLICATION, CHECK** and a **SIGNED MLS RULES AND REGULATIONS COMPLIANCE FORM** to the MLS Administrator (Kasima Hodge, 866-542-1418 [kasimahodge@aol.com](mailto:kasimahodge@aol.com)), application will be checked for completeness and reviewed for approval.

**DUES:**

The applicant must include a check, with the application, for the amount of dues.

**UPON APPROVAL OF MEMBERSHIP:**

1. Once approved, a member will be entered into the Flex system. The Flex web address is [www.flexmls.com](http://www.flexmls.com). New members will receive log-in (always begins with vir.) and password which must be changed to anything of choice. To change passwords, please refer to the "preference functions" section of the Flex online manual.
2. New agency members should notify all existing member agencies of the St. Thomas Board of REALTORS® of their office fax number(s), so that the existing members may add the fax numbers to their broadcast lists.

**ST. THOMAS BOARD OF REALTORS®MLS  
MEMBER APPLICATION**

To: St Thomas Board of REALTORS® MLS

\_\_\_\_\_ hereby applies for

(Individual or Business)

membership in the above named MLS, and enclose a check in the amount of \$\_\_\_\_\_

I hereby submit the following information for your consideration:

Name: \_\_\_\_\_  Ms.  Miss  Mrs.  Mr.  
(Please Print)

NRDS # \_\_\_\_\_

Attach copy of current VI Business License

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

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

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

Office Phone: \_\_\_\_\_ Office Fax: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

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

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

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

What is your "Realtor Board of Choice" \_\_\_\_\_ Member in good standing?  Yes  No

Have you participated in a Multiple Listing Service?  Yes  No Where? \_\_\_\_\_

Is the Office Address, as stated, your principal place of business?  Yes  No

If not, or if you have any branch offices, please indicate and give addresses:

\_\_\_\_\_  
\_\_\_\_\_

I hereby certify that the foregoing information furnished by me is true and correct, and I agree that failure to provide complete and accurate information as requested, or any misstatement of fact, shall be grounds for revocation of my membership if granted.

Signed \_\_\_\_\_

(Applicant)

**DATA**

Name as you want it to appear in roster and on STBOR MLS Website: \_\_\_\_\_  
 Individual       DBA       Partnership       Corporation

State position with firm:  Principal       Partner       Corporate Officer       Trustee  
 Employee       Ind. Contractor       Other

Are you actively engaged in the real estate business?  Yes     No

Do you hold yourself out to the general public as being actively engaged in the real estate business?  Yes     No

Dated: \_\_\_\_\_ 20 \_\_\_\_\_

Signed: \_\_\_\_\_  
(Applicant's Usual Form of Signature)

**St. Thomas Board of REALTORS®  
Multiple Listing Service  
Agent Compliance Agreement**

I, \_\_\_\_\_, a Realtor at

\_\_\_\_\_ (Agency Name)

hereby ratify that I have read and understand and will comply with the  
**St. Thomas Board of REALTORS® Multiple Listing Service Rules and Regulations.**

**Signature**

**Printed Name**

\_\_\_\_\_  
Realtor Date

\_\_\_\_\_  
Realtor Date

**Sponsored by**

\_\_\_\_\_  
Designated Realtor Date

\_\_\_\_\_  
Designated Realtor Date