



**CENTRALIZED REAL ESTATE
INFORMATION SERVICES, INC.**

P.O. Box 36479 Canton, Oh 44735
1-800-434-0MLS

NON-REALTOR® BROKER APPLICATION FOR MEMBERSHIP

My signature below certifies that I have read and understand all the regulations governing all phases of CRIS as contained in the CRIS Bylaws and Rules and Regulations and hereby agree to abide by these and any other Rules, Regulations, Policies and Procedures as may be adopted by CRIS. I also agree that my act of applying for membership shall evidence my initial and continuing commitment to abide by the Code of Ethics and my Board/Association's Constitution and By-Laws and the duty to arbitrate business disputes in accordance with the Professional Standards Procedural Provisions Code of Ethics and Arbitration Manual of my Board/Association and the Constitution and By-Laws of the Ohio Association of REALTORS® and the National Association of REALTORS®.

I understand that in the event that I leave CRIS, voluntarily or involuntarily, that I am obligated to return all materials identified as belonging to CRIS. Such materials include all current and comparable books, supplements and exclusive listing (right to sell) agreements.

I irrevocably waive any and all claims against CRIS or any of its officers, directors, members, employees or participants as to its or their acts in denying participation or in suspending, expelling or otherwise disciplining me as a participant.

A properly completed CRIS Membership Reporting Form must accompany this application along with the final approved version of the Certificate of Continuation issued by the Ohio Division of Real Estate.

I understand that by signing this application, I further acknowledge that I have no record of official, unsatisfied sanctions involving unprofessional conduct as a previous member of a REALTOR Board/Association.

Designated Broker Signature

File Number

Firm Name

Company Number

Address

City

State

Zip

Phone

Fax

Date

Number of licensees on roster who have access to or use of the Service _____

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(For CRIS Office Use Only)

Application Received _____
Application Approved _____
Office Number _____

Entry Fee \$ _____
Received _____
Office Code _____