



Tillamook County  
Board of Realtors

# MLS Registration Form

Please print clearly

## PERSONAL INFORMATION

Full Name: \_\_\_\_\_  
 Home Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Primary Email: \_\_\_\_\_ Other Phone: \_\_\_\_\_  Office  Cell  
 Home  Other  
 Agent Primary Phone: \_\_\_\_\_ Agent Fax #: \_\_\_\_\_  
 Mail Preference:  Home Address  Office Address Birth Date: \_\_\_\_\_

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

Board/Association of REALTORS®: \_\_\_\_\_

(Proof of membership required)

License#: \_\_\_\_\_ Principal Broker: \_\_\_\_\_

Check this box if you are a current MLS™ subscriber or have previously been one

Previous/Existing MLS ID: \_\_\_\_\_

Reason for new registration?  Dual License  Reinstatement  Other

## OFFICE INFORMATION

Office Name: \_\_\_\_\_ OFFICE NRDS: \_\_\_\_\_

Office Street Address: \_\_\_\_\_

## FOR OFFICE ONLY

FLEX MLS ID:

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Letter from outside board Y/N

Invoice: Current Qtr \_\_\_ Card \_\_\_ Card Activation \_\_\_ Future Qtr Dues: \_\_\_\_\_

CONFIRM NRDS: \_\_\_\_\_ Assoc: \_\_\_\_\_ VERIFY Lic: \_\_\_\_\_ Exp: \_\_\_\_\_