MARIS

1716 Hidden Creek Ct, Suite 150
St. Louis, MO 63131
Ph: 314-984-9111 Fax: 314-984-8848
membership@marismls.com

New MLS Member Application

NRDS#_____ LICENSE# _____

Name_____
(As shown on license)

Home Address _____ _____ ____ _____
(Street) (City) (State) (Zip Code)

Office Name_____Office MLS ID_____

E-mail Address (**REQUIRED**): _____

MARIS will email new member ID and password information to the email address provided.

_____ _____
PRIMARY PHONE (REQUIRED) **SECONDARY PHONE**

1. ☐ **YES** ☐ **NO** Does the office that holds your license want you to work as an office assistant ONLY?
(Will not be selling, listing or showing property, only assisting entire office agents/staff)

2. ☐ **YES** ☐ **NO** Will you primarily be personally assisting an agent or team within the office that holds your license?
(If 1 or 2 checked 'YES' inform member to contact MLS Membership staff for further assistance.)

MLS New Member Fee
MLS membership requires all licensed agents and state certified appraisers to pay a $50.00 New Member Fee. For prior members, if you have been terminated from MLS for more than 30 days, you are required to pay the new member fee.

MLS Membership Quarterly Fees
MLS quarterly fees are $90.00 per quarter for each active agent/appraiser. Quarterly amount due will depend on join date. Association/Board staff will determine the dues amount. MARIS policy provides for Full Quarter Refunds only.

Total New Member MLS Charges

New Member Fee $ 50.00 Quarterly Prorated Fees $_____

Total MLS Amount Due $_____

Please make checks/money orders payable to MARIS and mail to:

MARIS
P.O. Box 802776
Kansas City, MO 64180

Please use physical address (found at the top of this form) for all mailings that do NOT include a check/money order payment.

CC#_____ **EXP DATE** _____
(AMEX, MasterCard, Visa, Discover)

My signature below acknowledges that I am authorizing MARIS to charge my card the above specified MLS membership fees amount. If there are any discrepancies I understand that I am to contact MARIS directly for further explanation.

_____ _____
Applicant Signature **Date**

☐ **AUTO PAYMENT OPTION – check box and sign below: I hereby authorize MARIS to charge the above credit card each quarter for my MLS member fees, until further written notice by me. I understand that it is my responsibility to notify MARIS of any change to my charge card, i.e., expiration date, charge card type, etc.**

_____ _____
Applicant Signature **Date**