



Southwest Virginia Association of Realtors®

**Participant/Subscriber Application For  
Southwest Virginia Association of REALTORS®  
Multiple Listing Service (SWVARMLS)**

*By signing this Application to Participate/Subscribe to the Southwest Virginia Association of REALTORS Multiple Listing Service (MLS), I agree to abide by the SWVAR MLS Rules and Regulations thereof and to pay the costs incidental thereto. I also agree to adhere to the REALTORS Code of Ethics including the duty to arbitrate controversies arising out of real estate transactions as defined in the procedures of the National Association of REALTORS Code of Ethics & Arbitration Manual.*

**PARTICIPANT/SUBSCRIBER INFORMATION:**

Agent/Appraiser Name: \_\_\_\_\_ Requested Password \_\_\_\_\_  
Home Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
License #: \_\_\_\_\_ State Issued:  VA  TN  NC  Other: \_\_\_\_\_  
NRDS #: \_\_\_\_\_  
Mobile/Cell Number: \_\_\_\_\_ Home Telephone: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Signature of Agent/Appraiser: \_\_\_\_\_ Date: \_\_\_\_\_

**OFFICE INFORMATION:**

Office Name: \_\_\_\_\_  
Office Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_  
Primary Association: \_\_\_\_\_ FIRM NRDS # \_\_\_\_\_  
Broker/Appraiser Printed Name: \_\_\_\_\_

*I understand that as an SWVAR MLS Participant, I am personally responsible for MLS charges incurred by me, my associates and my company:*

Signature of Principle \_\_\_\_\_ Date: \_\_\_\_\_



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