



# CAPITAL AREA ASSOCIATION OF REALTORS®



3149 Robbins Road • Springfield, IL 62704 • Phone 698-7000 • Fax 698-7009



## MULTIPLE INFORMATION SERVICE PARTICIPATION AGREEMENT

As a REALTOR member in good standing of the Capital Area Association of REALTORS®, I hereby elect to become a Participant of the Capital Area Multiple Information Service (MIS) and herewith enclose my NON-REFUNDABLE application fee of \$1000.00.

I agree as a condition of participation in the MIS to abide by all relevant Bylaws, Rules and other obligations of participation including payment of fees and attendance at a mandatory MIS orientation program. Participant acknowledges that it is the responsibility of the Participant and/or user to verify these dates and to register for the orientation. Specifically, I acknowledge that I must attend an onsite MIS orientation within 60-days of acceptance of my application for MIS membership. *(Note: This orientation program lasts approximately 1-hour and will generally be held at CAAR's office on the third Wednesday of each month beginning at 10:00 a.m. although the dates may vary)* Participant acknowledges that it is the responsibility of the Participant to verify these dates and to register for the orientation. Failure to comply with this requirement will result in suspension of services.

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

\_\_\_\_\_  
(Company Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City)

\_\_\_\_\_  
(Zip)

\_\_\_\_\_  
(Office Phone)

\_\_\_\_\_  
(Home Phone)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)