


OFFICE APPLICATION

	WRIST INC. 1087 N MARKET ST. TROY, OH 45373 PHONE: 937-335-1117 FAX: 937-552-3198	WRIST Use Only: Office Code _____ <input type="checkbox"/> New Office <input type="checkbox"/> Change of Contact Info <input type="checkbox"/> No Board Affiliation	MLS _____ Invoiced _____
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OFFICE INFORMATION:

OFFICE NAME: _____

OFFICE ADDRESS: _____

_____ COUNTY: _____

OFFICE PHONE: _____ OFFICE FAX: _____

OFFICE NRDS NUMBER: _____ OFFICE LICENSE NUMBER: _____

BILLING EMAIL ADDRESS: _____

PRINCIPAL BROKER/ OR APPRAISER NAME: _____

<p><u>OFFICE AFFILIATION:</u></p> <input type="checkbox"/> PRIMARY OFFICE <input type="checkbox"/> SECONDARY OFFICE	<p><u>BOARD AFFILIATION:</u></p> <input type="checkbox"/> Midwestern Ohio Association of REALTORS <input type="checkbox"/> Springfield Board of REALTORS <input type="checkbox"/> Dayton REALTORS <input type="checkbox"/> Columbus REALTORS <input type="checkbox"/> West Central Association of REALTORS <input type="checkbox"/> Other _____ <input type="checkbox"/> No Board	<p><u>AGENTS/APPLICANTS:</u></p> TOTAL NUMBER OF LICENSED AGENTS _____ NUMBER OF PARTICIPATING AGENTS _____
<p><u>OFFICE TYPE:</u></p> <input type="checkbox"/> REAL ESTATE OFFICE <input type="checkbox"/> APPRAISAL OFFICE		

BROKER/APPRaiser INFORMATION:

FIRST NAME: _____

LAST NAME: _____

LICENSE NUMBER: _____

NRDS NUMBER: _____

HOME ADDRESS: _____

CITY/ST/ZIP: _____

EMAIL: _____

I agree as a condition of participation in W.R.I.S.T. to abide by all relevant bylaws, rules and other obligations of participation including payment of fees. I further agree to be bound by the REALTOR Code of Ethics including the obligation to submit to ethics hearings and the duty to arbitrate contractual disputes with other REALTORS in accordance with the established procedures of W.R.I.S.T. I understand that a violation of the Code of Ethics may result in termination of my MLS privileges and that I may be assessed an administrative processing fee which may be in addition to any discipline, including fines, that may be imposed.

I further agree to allow W.R.I.S.T. to electronically submit my company listings to third party internet site providers as indicated on individual property listings input to the W.R.I.S.T. MLS system.

I understand that by providing my mailing address, email address, telephone number, and fax number, I consent to receive communications sent from Western Regional Information Systems and Technology, Inc. via U.S. mail, email, telephone, or facsimile.

Printed Principal Broker Name	Principal Broker Signature and Date
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