



**WESTERN NEW YORK
REAL ESTATE
INFORMATION SERVICES INC.**

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**MLS
MEMBERSHIP APPLICATION**

Choose a password up to 8 alphanumeric characters: _____ please print clearly

Mr. Mrs. Ms. Miss

Date: _____

Name: _____

Company Name: _____

Company Address: _____ Zip Code: _____

Company Phone: _____ Company Fax: _____

Home Address: _____ City: _____ Zip Code: _____

Home Phone: _____ Voice Mail: _____ Cell Phone: _____

Direct Line: _____ Date of Birth: _____

Unique ID Number: _____

Expiration Date: _____

Email Address: _____

I hold the following Designations: GRI CRS CRB

Other _____

I prefer any and all mailings at my: Home Office

Applicant's Signature

Date

THERE ARE NO REFUNDS OF DUES OR FEES

REVISED 07/2010