

# MEMBERSHIP APPLICATION

SOUTH CENTRAL KANSAS MLS



Membership Specialist: Kylee Grote | membership@sckrealtors.com | 316-263-3167

## APPLICANT INFORMATION

**Full Name** :   
*(as listed on RE License)*

**Nickname** :  **Title** :  Mr.  Mrs.  Ms.

**Date Of Birth** :        
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**Home Address** :     
Street Address City, State Zip Code

**Mailing Address** :

**Cell Phone** :  **Direct Line** :   
(Office)

**Primary E-Mail** :   
*(used for all official membership communications and your public-facing MLS profile)*

**Alternate E-Mail** :   
*(an internal backup contact method for account recovery or if your primary address is unreachable)*

**RE License #** :  **Type** :  Salesperson  Broker  Appraiser

**Brokerage** :  **Broker Name** :

## QUALIFICATION INFORMATION

**!** To qualify for MLS-only access, applicants must:

- **Maintain an Active License:** Hold a current Kansas Real Estate or Appraisal License.
- **Broker Affiliation:** Be affiliated with a Broker who is a REALTOR® and an active Participant in our MLS.

Do you hold an active REALTOR® Membership?  Yes  No

Please list your Primary REALTOR® Association:

Will you require a Supra eKey?  Yes  No

*\*We offer both Secondary and Cooperating keys, though Cooperating key eligibility is determined by your specific location.*



## COMMUNICATION

Preferred Mailing Address :  Office  Home  Other: as specified above

Preferred Phone Number :  Office  Cell



Initial \_\_\_\_\_

I acknowledge that I will receive essential communications from RSCK/SCK MLS. While I may manage my communication preferences at any time, certain mandatory communications, including dues billing and other crucial notices, are excluded from this option.

## PROFESSIONAL CONDUCT

**Are there now, or have there been within the past three years, any complaints against you before any state real estate regulatory agencies or any other agency of government?**

If "Yes," specify the substance of each complaint in each state, the agency before which complaint was made, and the current status or resolution of such complaint.

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**Has your real estate license, in this or any other state, been suspended or revoked?**

If "Yes," specify the place(s) and date(s) of such action and detail the circumstances relating thereto.

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## EDUCATION REQUIREMENTS ACKNOWLEDGEMENT

**SCK MLS-Only Members:** I hereby acknowledge MLS-only membership is contingent upon the mandatory completion of an online SCK MLS Rules & Regulations course, which shall be completed within ninety (90) calendar days from the date of joining. Access to services is granted upon payment of dues/fees. *Per RSCK/SCK MLS Policy, failure to complete the requirement within the specified timeframe will result in membership suspension and reinstatement fees.*

All correspondence and notifications pertaining to educational requirements, including registration, deadlines, course availability, and completion status, will be primarily communicated through email. Upon completion, members will be upgraded from Provisional to Standard MLS membership status.

Written exceptions to this requirement must be approved by the RSCK Membership Specialist and/or RSCK CEO under qualifying circumstances.



\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

## FINAL PROVISIONS

I acknowledge that if accepted as a Member and subsequently resign or am expelled from membership in the Board with an ethics complaint or arbitration request pending, the Board of Directors may condition renewal of membership upon verification that I will submit to the pending ethics or arbitration proceeding and will abide by the decision of the Hearing Panel. If I resign or otherwise cause my membership to terminate, the duty to submit to arbitration continues in effect even after membership lapses or is terminated, provided the dispute arose while applicant was a REALTOR®.

I hereby certify the foregoing information furnished by me is true and correct, and I agree that failure to provide complete and accurate information as requested, or any misstatement of fact, may be grounds for revocation if my membership, if granted. I agree that verification, by the Board, of any of the foregoing information may be obtained from any source listed on the application. It is my understanding that this information is to be held in confidence and is for membership purposes only. I understand that service will start upon payment of dues and fees, and in the event of non-election that prorated MLS dues will be returned to me. I understand that payments of fees and/or dues as an established SCK MLS member are NON-REFUNDABLE. I agree to pay the established fees and to pay any and all dues as prescribed and/or any assessment or penalties as long as I remain a member of this corporation.



\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date