## **REQUEST FOR PARTICIPATION**



The MULTIPLE

## A Service of the **AIR Commercial Real Estate Association**

NAME:	DATE:
ACCREDITED FIRM:	
NAME OF RESPONSIBLE MANAGER/BROKER:	
ADDRESS:	
STATE: ZIP:	PHONE: ( )
DATE MOST RECENT ORIENTATION WAS COMPLETED:	

The undersigned, an Associate of the referenced Accredited Firm ("Firm"), hereby submits this request for participation in the services of The MULTIPLE. Such participation terminates when the undersigned is no longer associated with the Firm, or the Firm loses its membership rights.

This request is submitted with the full understanding and knowledge that the Firm is bound by the Rules of Professional Conduct, Bylaws, and operating policies of the AIR Commercial Real Estate Association ("Association") and/or The MULTIPLE, a service of the Association. The undersigned acknowledges that his /her actions could affect the standing of the Firm membership in the Association.

The Firm is required to submit to binding arbitration, through the auspices of the Association, all disputes with any other Accredited Firm, if either party shall so request, and if the Association is willing to arbitrate.

The undersigned waives all claims against the Association and The MULTIPLE, or any Member of agent, for any act in connection with the business of the Association and/or The MULTIPLE.

The undersigned shall not presume, represent, nor lead others to believe that he/she is a member of the Association until such time as a formal application for membership has been submitted to, and approved by, the Board of Directors of the Association.

The undersigned waives all claims against AIR or any of its officers, employees, members or agents, as individuals or as a group, for any act in connection with the business of the Association, and particularly as to its or their acts in admitting or failure to admit me as a member, or in disciplining me as a member, including the publishing of notice of the suspension or termination of my membership status as provided in Section 8.4 (b) of the AIR Rules of Professional Conduct.

SIGNATURE: \_\_\_\_\_ R.E. LICENSE NO. \_\_\_\_\_

EXP. DATE:

SIGNATURE OF RESPONSIBLE MANAGER/BROKER: