



SOUTHLAND REGIONAL  
ASSOCIATION OF REALTORS®, INC.

## Member and Assistant Form

Date: \_\_\_\_\_

☐ **Agent Assistant** – works with a single agent. (A licensed Assistant with the ability to add/edit listings for only the Agent, Office Manager, & Broker to which they are name “Assistant To.”) Cancellation of listing(s) must be made by Broker and or authorized Office Administrator.

☐ **Team Assistant** – works with a Team of agents. (A licensed Member that works with a team with the ability to add/edit listings for Agent, Office Manager, & or Broker to which they are name “Assistant to”). Cancellation of listing(s) must be made by Broker and or Authorized Office Administrator. **List Team Membership #'s**

\_\_\_\_\_

☐ **Office Assistant** – works with the Broker in a single office. (A licensed member with the ability to add/edit listings for all members of the office.) Give OA access to cancel listings? \_\_\_\_ YES \_\_\_\_ NO.

☐ **Multiple Office Assistant** – works with the Broker of a multiple FIRM locations. (A licensed member with the ability to add/edit listings for all members within all offices listed.) Give MOA access to cancel listings? \_\_\_\_ YES \_\_\_\_ NO. **List FIRM #'s:**

\_\_\_\_\_

### Member Assistant Information

CalBRE License. #: \_\_\_\_\_

Member Name: \_\_\_\_\_ Membership #: \_\_\_\_\_

Member Phone: \_\_\_\_\_ Member E-mail: \_\_\_\_\_

### Office Information

Firm Name: \_\_\_\_\_ Firm Number: \_\_\_\_\_

Firm Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Firm Phone: \_\_\_\_\_ Firm E-mail: \_\_\_\_\_

Responsible REALTOR®/Broker's Name: \_\_\_\_\_ Member #: \_\_\_\_\_

### Agent Information

Agent Name: \_\_\_\_\_ Membership #: \_\_\_\_\_

Agent Phone: \_\_\_\_\_ Agent E-mail: \_\_\_\_\_

**Agent Responsible REALTOR®/Broker's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

(By signing, you as the designated Responsible Realtor® are authorizing the above named assistant access as indicated).

**Agent Member for Assistant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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**MEMBERSHIP DEPT. FAX: 818-786-0364**