



ARCADIA ASSOCIATION OF REALTORS®

Association and MLS Activation Form

Date: _____

Agent Name: _____ MLS ID#: A _____

Office Name: _____ MLS Office Code: _____

Effective Date of Activation: _____

Activating Association: Activating MLS:

Supra ActiveKEY/eKEY Serial Number: _____

AAR Broker Signature: _____

FOR ASSOCIATION OFFICE USE ONLY

Received by: _____

Outstanding Invoices: _____

Paid MLS: _____

Paid: **N.A.R.** Yes / No **C.A.R.** Yes / No **A.A.R.** Yes / No

Membership MLS Supra NRDS Bookkeeper