



BRANCH MEMBERSHIP APPLICATION FORM

Instructions

Please fill out the form to completion with the information that corresponds exactly as it appears on the registration issued by Real Estate Council of Ontario (RECO) as proclaimed by the Real Estate and Business Brokers Act (Ontario) (the "Act").

Attach the following documents and submit to membership@mreb.ca once complete.

- i. Completed Broker of Record or Broker Manager MREB Membership Application
- ii. Copy of articles of incorporation or Letters Patent of Incorporation
- iii. Copy of Brokerages RECO Registration
- iv. Copy of Broker of Record RECO Registration

Branch Information

Branch Name			
Trade Name (as approved by RECO):			
Street Address (include Unit # if applicable):	City/Town:		
Postal Code:	Brokerage Website (if applicable):		
Phone Number:	Fax Number:		
Brokerage RECO Registration:	RECO Expiry Date: (YY/MM/DD)		
Brokerage Email:			

Broker of Record Information

Broker of Record Name:			
Broker of Record RECO Number:	Expiry Date (YY/MM/DD):		
Others with Authority to Sign for Branch:	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
Name of Additional Signing Authority Member (1):	Name of Additional Signing Authority Member (2):		

Has the Branch ever been a member with MREB previously? YES NO

Signature

Signature of the Person Submitting this Form

Name

Name of the Person Submitting this Form (print)

Date of Signature

DD/MM/YY



BRANCH ADMIN APPLICATION FORM

Please Note: MREB will extend access up to 2 Admins at no extra cost. Any additional Admins will be charged a \$50.00 +HST set up fee and \$60.00 +HST annual monitoring fee (on a pro-rated basis of \$5.00+ HST per month.)

Branch administrators will be granted access to MREB.ca and are responsible to submit the required membership documents to active/transfer/terminate account access for agents. They will be your branch's contacts for MREB related services, notices, and news. Branch admin must be an unlicensed under RECO.

Admin #1

Admin 1 Full Name:			
Phone Number:		Extension:	
Email:			

Admin #2

Admin 2 Full Name:			
Phone Number:		Extension:	
Email:			

Admin #3

Admin 3 Full Name:			
Phone Number:		Extension:	
Email:			

Admin #4

Admin 3 Full Name:			
Phone Number:		Extension:	
Email:			



CHARGES AND PAYMENT INFORMATION

BRANCH JOINING FEE: \$250.00 plus HST

IMPORTANT NOTICE: FEES ARE NON-REFUNDABLE ONCE PAID TO MREB

Branch Information

Branch Name	
Member Name (Please print):	
Name on Credit Card:	
Amount:	\$
MREB USE:	AUTHORIZATION NUMBER:

Please provide a DIRECT contact number:	Phone #:
Card Type:	MASTERCARD: <input type="checkbox"/> VISA: <input type="checkbox"/>
Card Number:	
Expiry Date:	MM/YY

Signature Name
Signature of the Person Submitting this Form *Name of the Person Submitting this Form (print)*

Date of Signature
 DD/MM/YY

MREB USE ONLY:	
Branch Name:	_____
Branch MI #:	_____ CREA ID: _____
Date Processed:	_____ Staff Signature _____