

RESIGNATION FORM



Phone: 704-940-3110 Fax: 980-556-7803 Email: membership@carolinahome.com

SECTION I						
I hereby resign from (please check applicable)						
Charlotte Regional Realtor® Association, Inc. (Complete Section II)						
Canopy MLS (Complete Sections III & IV)						
Reason for Resignation (Please check all that apply)						
Moving out of the area						
Health reasons						
Financial reasons						
Lack of professional support						
Lack of family support						
Lack of managerial support						
Other (please detail)						
Were you in the business full time or part time?						
SECTION II						
With this form, I am requesting to discontinue my membership with the Charlotte Regional Realtor® Association . I acknowledge and understand that in the event I re-apply for membership <i>within two (2) years</i> of the resignation date listed below, my membership will be <i>reinstated</i> with a \$50 reinstatement fee plus the current year annual dues and I will NOT be required to attend the New Member Orientation. Should I re-apply for membership <i>after two (2) years</i> from my effective resignation date, I will be required to attend the necessary New Member Orientation and will be required to pay all <i>new applicant</i> fees.						
Further, I acknowledge and understand that, if I am completely discontinuing <i>any</i> association membership to the National Association of REALTORS®, I relinquish the use of the NAR trademark designation "REALTOR®".						
Name (Print)	Member/MLS #					
Signature	License #					
Company/Firm	Date of Resignation					
Fees subject to change based on current Board of Director's approved association fees.						

SECTIO	ON III	With this form, I am requesting to (Please indicate applicable Canop		S.			
Member Participant (head-of-firm, discontinuing Firm							
Subscriber (Previous Firm, no longer affiliated with:							
date list fees an	ted be	e and understand that in the event I low, my MLS access will be re-insta NOT be required to attend the Can there will also be a \$250 Firm Rea	ited, I will have a re-instatement fe opy MLS New Member Orientation	e of \$50 plus the o	urrent quarterly		
New Me	ember also b	oply <i>after two (2) years</i> from my resonant or open or open or open or open open open open open open open open	all new applicant fees. To re-esta	blish a firm, the \$6	00 firm initiation		
		IDERSTAND THAT ANY COMING EMAINING IN THE MLS AT THE T					
Name ((Print)			Mei	mber/MLS #		
Signatu	ıre				e of Resignation		
		Fees subject to change based on o	current Board of Director's approve	ed Canopy MLS fe	es.		
	I currently have listings in the Canopy MLS: YesNo If yes, please indicate if those listings have been transferred to another agent or withdrawn: 2. I have removed the lockboxes that I or my company owns from individual properties: YesNo N/A If yes, company-owned lockboxes must be returned to the firm; for individually-owned lockboxes, you have the option to:						
	a b	 Sell back to the Association/Canopy offices. Sell to another agent. If you choose Member Services and Accounting. 	MLS. If you choose this option, please this option, you must complete a <i>Local</i>				
3.	Supr	a / SentriKEY Keyholders					
	lf N	upra DisplayKEY: I have returned my l no, I understand that I must return my I ILS within two (2) weeks in order to re eeks will result in forfeiture of my secur	eased Supra key (key, cradle and crade ceive my \$25 security deposit. Failure	dle cords) to the Ass	ociation/ Canopy		
	A	upra eKEY (smartphone application): I ssociation/Canopy MLS, staff will auton ancel my monthly service plan with Sup	natically discontinue this service per m	ny membership resig			
	w h	SentriKEY: I understand that, if I have not previously cancelled by my SentriKEY service with the Canopy MLS, staff will automatically discontinue this service per my membership resignation. NOTE: SentriKEY cards are purchased; however, if you would like to re-cycle your SentriKEY product, please return to the association nearest you for Canopy MLS staff to pick up.					
4.	In the event you are due a Canopy MLS and/or Supra Key quarterly refund, please indicate your current mailing address for refund check to be sent (please allow 2-3 weeks):						
		Street/PO Box	City	State	ZIP		