

Election to participate in the GFC CMLS IDX form

Participation in the GFC CMLS Internet Data Exchange program is automatic. You need to complete this form **ONLY** if you have previously “opted” your firm out of the program and now wish to participate.

This form must be filled out completely and signed by the Participant for your company. Once you have filled it out and signed it, fax or mail it to the GFC CMLS at Suite 23, 101 Merritt 7 Corp. Park, Norwalk, CT 06851-6216, Fax: (203) 840-6678.

Firm Name: _____ Firm MLS OFFICE ID: _____

Participant: _____ Broker MLS AGENT ID: _____

E-mail address: _____

*(You **must** supply an e-mail address here. This address will be the GFC CMLS' primary means of communicating with you about IDX developments.)*

Firm Street Address: _____

Firm City, ST, ZIP: _____

Firm Phone: _____ Fax: _____

Please check all appropriate box(s)

MY FIRM WISHES TO PARTICIPATE IN THE GFC CMLS INTERNET DATA EXCHANGE PROGRAM. I understand that this applies to all of my firm's offices and that I am hereby giving every other Internet Data Exchange Subscriber in the GFC CMLS permission to advertise my firm's active MLS listings on its own website, subject to the Rules and Regulations of the GFC CMLS and that other IDXs are not obliged to display my listings. I authorize the GFC CMLS to distribute my active listing data to other Internet Data Exchange Subscribers pursuant to its Rules and Regulations. I also understand that I may reverse my decision and opt out of the IDX program at any time in the future by completing the appropriate paper work.

MY FIRM DOES – DOES NOT WANT TO ALLOW OTHER BROKERS TO PUBLISH OUR OPEN HOUSES ON THE INTERNET

MY FIRM DOES – DOES NOT WANT TO PARTICIPATE IN THE GFC CMLS INTERNET DATA EXCHANGE PROGRAM AT THIS TIME BUT DOES NOT WANT TO ALLOW OTHER BROKERS TO PUBLISH OUR LISTING'S ADDRESSES ON THE INTERNET.

I certify that I am the Participant for the firm whose ID number first appears above. I represent that I have authority to execute this form on behalf of my firm and all of its offices.

Signature: _____ Dated: _____