

## BROKER AUTHORIZATION AGREEMENT

I,	(first and last name) act as Principal Broker for
	(real estate firm) with an
address of	and wish to authorize
administrative professionals in my office to REALTORS® forms on threaltors.com through	own an account for purposes of accessing Tennessee
	Tennessee REALTORS® for an annual fee of twenty-essional per firm location. I agree to pay that fee upon his Agreement per firm.
for another twelve (12) month term, unless I	welve (12) month term and shall automatically renew provide notice to Tennessee REALTORS® of intent rty (30) days before the end of the current Agreement
<u>e</u>	nistrative professionals listed below will have access to all responsibility for actions of the administrative
	ensing Agreement ("EULA") provided by Tennessee istrative professionals listed below will be bound by accessing Tennessee REALTORS® forms.
Principal Broker	Date
Email	Contact Number
List of administrative professionals I am seek serve:	ring access for and the physical firm location they
Administrative Professional	Office Location
Email	Contact Number