

# GOLD NATION "REFER A FRIEND" ENROLLMENT & REGISTRATION FORM

**THE PURPOSE** of this program is to provide RE/MAX Gold Nation Agents with the opportunity to invite their friends and colleagues with other brokerages to learn more about how RE/MAX Gold Nation could benefit their careers. The "Refer a Friend" Program will exchange a generous Revenue Share to the Referring Agent for their referrals of Qualified Productive Associates who sign a Primary Agent Commission Addendum and who become affiliated with RE/MAX Gold Nation.

## PROGRAM DEFINITIONS

- Friend is defined as an Agent who has closed at least 4 Transaction Units and \$2,000,000 in Sales Volume in the past 12 months.
- "The Company" is defined as the real estate brokerage entities of RE/MAX Gold Nation.

## REVENUE SHARE PAY PROGRAM

Upon the affiliation of the Friend, the Agent will now qualify for a revenue share of the Company's portion of commission for the first two years of Friend's affiliation with the Company as follows:

- Year 1 Revenue Share of \$2500
  - The commission revenue share will be paid to the Agent in four equal payments of \$625 from the first four closings with the Company within first 12 months of the Friend's affiliation with the Company.
- Year 2 Revenue Share of \$1250
  - The commission revenue share will be paid to the Friends in two equal payments of \$625 from the first two closings with the Company during the second contract year of the Agent's affiliation with the Company.
- The associate with an active referral in process must be affiliated with the Company at all times when commission revenue share payments are set to be paid under the Program in order to receive such payments. Should an associate become unaffiliated with the Company, no further commission revenue share payments shall be due to the associate.
- Friends cannot be affiliated as Team Members for existing Teams with the Company.
- Friends must affiliate as Primary Agents with the Company.
- Friends registrations are valid for 120 days after registration and enrollment has been completed and returned to Company.

## I'M IN, LET'S DO THIS!

By signing this form, you agree to: (1) participating in the "Refer a Friend" program, (2) that you are not currently obligated or restricted by any non-compete or non-solicitation agreement with any previous brokerage(s), and (3) you understand and agree to the terms of this program as outlined above.

\_\_\_\_\_  
Gold Nation Agent Name

\_\_\_\_\_  
Office Location

\_\_\_\_\_  
Gold Nation Agent Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name of Friend You Are Referring

\_\_\_\_\_  
Current Brokerage and Location

**MANAGERS: SEND COMPLETED FORMS to:** [newagent@norcalgold.com](mailto:newagent@norcalgold.com)

\_\_\_\_\_  
BELOW: For Administrative Purposes:

\_\_\_\_\_  
Received by the Service Center Selection Team

\_\_\_\_\_  
Date