

Transfer Form

There is a \$25 transfer fee. Please submit payment with your change request; transfer will be processed when the fee is paid.

Current Membership Type: Broker REALTOR® Non-member Salesperson MLS Only
 Board Only Secondary Senior Lifetime Affiliate

Name: _____ Effective Date: _____

Home Address: _____ City: _____ Zip: _____

Cell Phone #: _____ Real Estate License #: _____

New EMail Address: _____

Transfer OUT Office Name: _____ Broker Code: _____

Transfer INTO Office Name: _____ Broker Code: _____

Transfer INTO Office Address: _____

New Membership Type: Broker REALTOR® Non-member Salesperson MLS Only
 Board Only Secondary Senior Lifetime Affiliate

Signature is Required

Current Broker/DR Name (Please enter or PRINT): _____

Broker/DR Signature: _____ Date: _____

NEW Broker/DR Name (Please enter or PRINT): _____

NEW Broker/DR Signature: _____ Date: _____

OR Affiliate Name (Please enter or PRINT): _____ Date: _____

Affiliate Signature: _____

Method of Payment Cash Check # _____ Visa MC Discover Personal Card Corporate Card

Card #: _____ Exp. Date: _____ Amount \$ _____

Name on Card (Please enter or PRINT): _____

Signature: _____