

## West Central Association of REALTORS® 10443 Northland Drive Big Rapids, MI 49307 231-796-3640

wcar@westcentralaor.org

## **Affiliate Membership Status Change Form**

Form covers many changes, only fill out area pertaining to the requested change.

Designated Affiliate Transfer:

		•			
	to request a change in incomplete. If the info completion.		• • •	•	
1)	<b>Current Designate</b>	ed Affiliate Name:			
2)	<b>Current Designate</b>	ed Affiliate Email:			
3)	<b>Designated Corpo</b>	ration Office:			
	<b>Corporation Office</b>				
	New Designated A				
	New Designated A				
7)	Transfer Fee: \$25.	.00			
		(Send form & transfer	fee to wcar@westce	ntralaor.org)	
		Affiliate Memb	er Changes:		
Co	rporation Addre	ess:			
	Corporation Nam	ie:			
	New Address:				
Co	rporation Signatur	e:	Da	ite:	<u></u>
Me	ember Address:				
	Member Name: _				
	New Address:				
Me	mber Signature: _			ite:	
En	nail Address: Ple	ase print clearly.			
	Corporation Ema	•			
	Corporation Nam	<del></del>			

Old email:

Corporation Signature: \_\_\_\_\_ Date: \_\_\_\_

Member Name:

New email: \_\_\_\_\_

Member Email:

Member Signature:	Date:	
Explain:		
Other:		
OALs and		
Member Signature:	Date:	
New phone #:		
Old phone #:		
Member Name:		
Member Phone:		
Corporation Signature:		
New phone #:		
Old phone #:		
Office Name:		
Corporation Phone:		
Phone Number: Please print clearly.		
Member Signature:	Date:	
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