

Phoenix Association of REALTORS®

Member Change Form

Please Select Change(s) That Apply:

Name Address Phone Web Email Company

Please note: Reinstate Forms are processed within 1-2 business days and in the order received. **No exceptions made.** If you are changing companies, your new DR/Broker must be a member of PAR. If they are not, processing time may be delayed and services may be temporarily interrupted.

PAR Member # OR Agent MLS Id _____ Date _____

Member Name (Please Print Clearly) _____

Are you the Broker/DR? Yes No If YES: Please also complete a Company Change Form to ensure proper updating of all accounts!

◆ ALL FIELDS IN THIS SECTION ARE MANDATORY ◆

THIS FORM IS IN THE EXACT DATA ENTRY ORDER FOR ACCURACY

Current residence address: _____

(office address/P.O. Boxes are not permitted)

City, State, Zip Code: _____

Email Address: _____

SEE THE NEXT SECTION BELOW ON A SUGGESTION TO PREVENT SPAM / JUNK EMAILS.

◆ ALL FIELDS IN THIS SECTION ARE VOLUNTARY ◆

2nd Email (for MLS system only -Note: you will receive junk mail at this email. Suggestion: set up and use a free email account.)

2nd Email Address: _____ @ _____

Home Phone# _____ Cell Phone # _____

Home Fax # _____

◆ ALL FIELDS IN THIS SECTION ARE MANDATORY ◆

Preferred Phone: Cell Home Office (office number on file)

Preferred Fax: Home Office (office fax number on file)

Preferred Mail Home Office Other: _____

FIRM SEVERING (LEAVING) FROM

Company Name: _____ Broker Code: _____

Street Address: _____

FIRM (HIRING) TRANSFERRING TO

Company Name: _____ Broker Code: _____

Street Address: _____

Personal Web address: http://www. _____

Completed by:

Signature _____

Fax this form back to 602-246-1512