

**WEST PASCO BOARD OF REALTORS AFFILIATE
MEMBERSHIP CHANGE FORM**

ALL OF THE INFORMATION BELOW MUST BE FILLED IN AND SUBMITTED INTO THE BOARD OFFICE WITHIN TEN (10) DAYS. CHANGES WILL BE MADE ONLY AFTER RECEIVING THIS FORM.

STATUS: (DAF) Designated Affiliate or (AF) Affiliate circle one

NAME: _____

FIRM: _____

BUSINESS ADDRESS: _____ CITY _____ STATE/ZIP _____

BUS.PHONE NO. _____ FAX NO _____

EMAIL ADDRESS _____

CURRENT YEARS DUES HAVE BEEN PAID: YES OR NO

KEYPAD AND PIN NUMBER _____

SIGNITURE OF DESIGNATED AFFILIATE OR BANK MANAGER DATE

TO CHANGE A DESIGNATED AFFILIATE THE PREVIOUS DESIGNATED AFFILIATE MUST SIGN.

