



Member Change Request

Member Name _____ Date _____

Please Check the Appropriate Change:

☐ **Personal Data Change (To be completed by Agent)**

Complete this section to make changes to your personal information.

Name (new) _____ Primary E-mail _____

Home Address _____ City, State, Zip _____

Home Phone _____ Office Phone _____ Cell Phone _____

☐ **Transferring Office (To be completed by Agent) \$100 Transfer Fee**

Complete this section if an agent is transferring from one office to another. A membership application needs to be completed if an agent is transferring to NEABOR from another Association.

Previous Office Name _____ New Office Name _____

Office Address _____ City, State, Zip _____ Office Address _____ City, State, Zip _____

E-mail Address _____ E-mail Address _____

Preferred Phone _____ Preferred Phone _____

☐ **Cancelling NEABOR Membership (To be completed by Agent or Office)**

Check the appropriate box below to terminate an agent; license must be returned to the Arkansas Real Estate Commission – please attach copy of terminated license.

Please Select one:

- ☐ Primary Membership
- ☐ Secondary Membership
- ☐ MLS Only Subscription

Office Name _____

Office Address _____ City, State, Zip _____

Home Address _____ City, State, Zip _____

Effective Date _____ If transferring to another association, please list which one: _____

Reason for Cancellation: _____ Transferred to a non-member Office _____ Left Real Estate Industry _____ Agent Terminated

Signature: _____ Date: _____