



# Member Change Form

Use this form to request a change in member information or office affiliation.  
Please email completed form to [MemberServices@MarinCountyRealtors.com](mailto:MemberServices@MarinCountyRealtors.com)

OFFICE TRANSFER       OFFICE SEVERANCE       UPDATE CONTACT INFO

*This section to be filled out by member AGENT. Please complete with updated information as you would like it to be reflected in your account.*

Full name as it appears on your real estate license \_\_\_\_\_

Preferred Name \_\_\_\_\_

Email Address \_\_\_\_\_ Preferred Contact # \_\_\_\_\_  
 Home       Cell

Mailing Address \_\_\_\_\_

Member Signature \_\_\_\_\_

DRE License # \_\_\_\_\_ Date \_\_\_\_\_

*This section to be filled out by your BROKER.*

**Old Office Information**

Office Name \_\_\_\_\_

Office DRE # \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

Signature of Broker  
(Severance Only) \_\_\_\_\_

Broker Name  
(Please Print) \_\_\_\_\_

Date \_\_\_\_\_

**New Office Information**

Office Name \_\_\_\_\_

Office DRE # \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

Signature of Broker  
(Severance Only) \_\_\_\_\_

Broker Name  
(Please Print) \_\_\_\_\_

Date \_\_\_\_\_

MAR Use Only - Member Change Form

UPDATE RAPATTONI       UPDATE SUPRANET       SEND TO BAREIS      Staff Initials \_\_\_\_\_