



MEMBER CHANGE FORM

This is a notification that _____
 (REALTOR® Member – print name)

Member’s License #: _____

TRANSFER	
Transfer from:	
Transfer to:	
Transfer effective date:	

Or

LICENSE STATUS	
Has re-instated with firm:	
Returned License to GREC:	
Inactive with firm:	

Or

MEMBER’S PERSONAL INFORMATION	
Mailing Address Change:	
Phone Number Change:	
Email Address Change:	

Change requested by: _____

COMMENTS:
