**Affiliate Member Change Form**

**Affiliate Member Firm Information:**

|  |  |
| --- | --- |
| Company Name:  | Phone: |
| **Changes for an individual Additional Affiliate Member (please complete):** |
| Affiliate Office Member (please print): |

|  |  |  |
| --- | --- | --- |
| Name  | Title | Supra Key needed: ⬜ Yes ⬜ NoDate of Birth: |
| ⬜ Add ⬜ Delete ⬜ Change information |
| Name  | Title | Supra Key needed: ⬜ Yes ⬜ NoDate of Birth: |
| ⬜ Add ⬜ Delete ⬜ Change information |
| Name  | Title | Supra Key needed: ⬜ Yes ⬜ NoDate of Birth: |
| ⬜ Add ⬜ Delete ⬜ Change information |

|  |
| --- |
| There will be a $15 non-refundable, non-transferrable fee for each additional office member. *Note: If above Additional Affiliate Member is a holder of a Lockbox Key, a deletion of this agent does not automatically cancel their service through Supra.*  |
| **Changes to the Primary Affiliate Membership (please complete):** |
| ⬜ Company Name  | ⬜ Address  | ⬜ Office Phone | ⬜ Fax |
| ⬜ Authorized Signatory/Primary Member | ⬜ Website | ⬜ Category |
| Current information:  |
| Change to: |
| Additional Comments: |
| Authorized Signatory Name: |
| Signature: X  | Date: |
| This form must be signed by the Authorized Signatory of the Organization in order to process any changes. Changes must be submitted within 30 days. Failure to submit changes within 30 days could result in a temporary suspension of listings on gaar.com. |
| Please allow 24-48 hours for requested changes to transfer in the GAAR membership database. Completed form may be faxed to 505-842-0448 or emailed to membership@gaar.com. |

Affiliate Member Change Form Rev 11/2016