Phoenix Association of REALTORS®

Member Change Form

Please Select Change(s) That Apply:	received. No exceptions made. If you are changing companies, your new DR/Broker
□ Name □ Address □ Phone □ Web □ Email □ Company	must be a member of PAR. If they are not, processing time may be delayed and services may be temporarily interrupted.
PAR Member # OR Agent MLS Id	Date
Member Name (Please Print Clearly) Are you the Broker/DR? ☐ Yes ☐ No If YES: Please also complete a Company Clearly ◆ ALL FIELDS IN THIS SECTION ARE MATTHIS FORM IS IN THE EXACT DATA ENTRY ORDER FORM	hange Form to ensure proper updating of all accounts! ANDATORY
Current residence address: (office address/P.O. Boxes are not permitted)	
City, State, Zip Code:	
Email Address:	
SEE THE NEXT SECTION BELOW ON A SUGGESTION TO PRI	EVENT SPAM / JUNK EMAILS.
◆ ALL FIELDS IN THIS SECTION ARE VO	DLUNTARY •
2 nd Email (for MLS system only -Note: you will receive junk mail at this email.	Suggestion: set up and use a free email account.)
2 nd Email Address:	@
Home Phone#Cell Phone #	
Home Fax #	
◆ ALL FIELDS IN THIS SECTION ARE MA	ANDATORY ◆
Preferred Phone: Cell Home Office (office number on file)	
Preferred Fax:	
Preferred Mail Home Office Other:	
FIRM SEVERING (LEAVING) FROM	
Company Name:	Broker Code:
Street Address:	
FIRM (HIRING) TRANSFERRING TO	
Company Name:	Broker Code:
Street Address:	
Personal Web address: http://www	

Please note: Reinstate Forms are processed within 1-2 business days and in the order

Completed by:

Signature_