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Please complete this section to make changes to your personal records and fax back to GGAR at 618-692-8307. If you have a name change, you must also contact the Illinois Department of Financial and Professional Regulation at 217-782-3000.

Name: _____

Name Change: _____

New Home Address: _____

New Home City, State, Postal Code: _____

New Home Phone Number: _____

New Cell Phone Number: _____

New E-mail Address: _____

Please complete this section and attach 45 day sponsor permit when you change offices and fax back to GGAR at 618-692-8300. A transfer fee of \$30 will be billed directly to your new office.

Name: _____

Previous Office: _____

New Office: _____

New Office Address: _____

New Office City, State, Postal Code: _____

New Office Phone Number: _____

New Office Fax Number: _____

New E-mail Address: _____

Effective Date of Transfer: _____

Thank you for completing this form. It will ensure an efficient update of your records with your local, state, and national real estate associations.

For Board Office Use Only

____ Access ____ MARIS ____ Member Activity ____ Membership Roster

____ Navica/NRDS ____ Supra ____ Orientation ____ ActiveKey Deposit

____ Website ____ Convio ____ Profile ____ QuickBooks ____ Transfer Fee