

48 Schoosett Street, Pembroke, MA 02359
P. 781-826-5139 F. 781-826-0329
www.SouthShoreRealtors.com
info@SouthShoreRealtors.com

Associate Information Form

Please note: In accordance with the Bylaws of South Shore REALTORS®, Inc. Article VI, Section 6, REALTOR® Principals are required and must notify the Association in writing within five (5) days of an Agent's Office association or disassociation.

Today's Date:	Agent Start Dat	e	
Please make the following change fo	r the Agent listed on this for	m:	
Add this NEW agent to our roster	and send an application and	d dues invoice. (Never been a REAL	TOR®.)
☐ Transfer this Agent from the following Realtor® Association:		to South Shore RI	EALTORS
☐ Transfer this Agent from		to the Office lists	ed below
☐ Disassociate this Agent from our	Office roster as of	_	(date
☐ Reinstate this Agent to South Sho	ore REALTORS® - Agent was a	a member in	(date
☐ Add as SECONDARY member, cur	rently PRIMARY with Realto	r [®] Association:	
AGENT NAME			
Home Address			
Home City	State	Zip Code	_
Home Telephone	Mobile	Date of Birth	_
E-Mail Address			
Real Estate License NumberSales / Broker			
OFFICE NAME			
Office Address			
Office City	State	Zip Code	_
Office Telephone	Fax		
Designated REALTOR®/Broker Owne	r Name		