



Name: _____ NRDS # _____
Office: _____ Office # _____
Address: _____ City: _____ State: _____ Zip: _____
Contact Phone: _____
E-mail: _____

Please terminate NWBOR MLS membership and participation, effective on _____.
Please note: All payments already made are non-refundable.

REASON FOR TERMINATION (Please choose one):

- | | | |
|----------------------|------------------------------|---------|
| Changing Association | Broker Terminated | Retired |
| Leaving Business | Other (please explain below) | |

I understand that I, the Responsible Broker, must remove an agent from my NWBOR record to avoid incurring non-member assessment fees.

Broker Signature: _____ Date: _____

Please email request to Laura@nwbob.com or fax to 307-587-0766.

Please visit www.nwymls.com for current information and fees.