

Member # _____

Office # _____

Submit completed form to Admin Center	<table border="0"> <tr> <td>Central Valley</td> <td>(209) 858-1709 / staff@cvar.org</td> <td>Placer</td> <td>(916) 624-8023 / membership@pcaor.com</td> </tr> <tr> <td>El Dorado</td> <td>(530) 676-0180 / membership@edcar.org</td> <td>Sacramento</td> <td>(916) 283-8812 / membership@sacrealtor.org</td> </tr> <tr> <td>Lodi</td> <td>(209) 368-8289 / staff@connectlar.org</td> <td>Yolo</td> <td>(530) 666-7444 / info@yolorealtors.com</td> </tr> <tr> <td>Modesto</td> <td>(209) 549-7079 / modesto@metrolist.net</td> <td></td> <td></td> </tr> </table>	Central Valley	(209) 858-1709 / staff@cvar.org	Placer	(916) 624-8023 / membership@pcaor.com	El Dorado	(530) 676-0180 / membership@edcar.org	Sacramento	(916) 283-8812 / membership@sacrealtor.org	Lodi	(209) 368-8289 / staff@connectlar.org	Yolo	(530) 666-7444 / info@yolorealtors.com	Modesto	(209) 549-7079 / modesto@metrolist.net							
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New Office Affiliation	<p style="color: red; text-align: center;">*Requires a copy of your BRE license or completed BRE form 214 reflecting this information*</p> <table border="0"> <tr> <td>Office Name _____</td> <td>MLS Office ID _____</td> </tr> <tr> <td colspan="2">Office Address _____</td> </tr> <tr> <td>City _____</td> <td>State <u>CA</u> Zip Code _____</td> </tr> <tr> <td>Office Phone _____</td> <td>Office Fax _____</td> </tr> </table>	Office Name _____	MLS Office ID _____	Office Address _____		City _____	State <u>CA</u> Zip Code _____	Office Phone _____	Office Fax _____													
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