

DELETE CVAR MEMBERSHIP

I,	OF INDIVIDUAL (PLEASE PRINT)	WITH	Name of Firm (Please Print)	
NO LON	IGER WISH TO RETAIN MEN	MBERSHIP IN	THE CATAWBA VALLEY AS	SOCIATION
OF REA	LTORS®, INC. PLEASE DRO	OP MY MEMB	ERSHIP, EFFECTIVE IMMED	DIATELY.
×				
SIGNATURE OF INDIVIDUAL			DATE	•
	FOR OFFICE USE ONLY			
	DATE RECEIVED			
	VERIFICATION SIGNATURE			