

TEAM CHANGE FORM

Team Additions

Team Name: _____

Team Member's Name: _____

Team Member Role: _____

Start Date: _____

Party responsible for
monthly billing:
(rainmaker or associate) _____

If individual is responsible, the individual will receive a bill each month for monthly dues to the market center. If the team member fails to pay any outstanding bills to the market center within 90 days, the rainmaker will be responsible for the balance.

Associate's split with
rainmaker on transactions: _____

Team Removals

Team Name: _____

Team Member's Name: _____

Team Member Role: _____

End Date: _____

Party responsible for current
month's agent bill:
(rainmaker or associate) _____

Instructions for remaining
transactions: _____

By signing this agreement, I understand that by adding or removing team members, my GCI and units will change accordingly for awards purposes. I also understand that if this form is not completed and submitted to the MCA in a timely manner, (within 30 days of any team changes) the Market Center is not responsible for errors resulting from team members not being added or removed in the system in a timely manner.

Rainmaker: _____

Date: _____

Team Member: _____

Date: _____

MCA: _____

Date: _____