



"Diversified Insurance and Financial Services Since 1978"

Update In Agent Information

Please print clearly. Before submitting, please read the below statement and sign your name at the bottom.

Fax to :: 843.763.1602 Email to :: hillaryh@bmcagency.com

NAME :: _____ DATE :: _____

ADDRESS :: _____

CITY :: _____ STATE :: _____ ZIP :: _____

PHONE :: _____ FAX :: _____

EMAIL :: _____

_____ **(initials)** I authorize BMC Agency to make this change and to notify any and all Companies that I currently hold an appointment for through their distribution of this change. It is my responsibility to notify companies of this change should I NOT initial this statement.

_____ **(initials)** I authorize BMC to add me to their Email list. (I understand I can unsubscribe at any time).

By signing below, I understand that my current contact information will be changed to the above listed information.

Signature

Date