



Date: _____ Membership Office Representative: _____

Potential Member

Potential Members Name: _____

Potential Members Address: _____

Potential Members Phone Number: _____

Additional Information: _____

Realtor Information

Realtor: _____ Real Estate Company: _____

Realtor's Address: _____

Realtor's Phone Number: _____

Called In

Visited Membership
Office

Other _____

Action Taken By Membership Office: _____

Date Membership Activated: _____