



Name: Email:	License Number: Today's Date: Phone Number:
Email:	
1. How long have you been a Realtor?	
2. Are you full-time or part-time Realton	or?
full-time part-tim	ne
3. Please list any other organizations t	hat you belong to
4. How many properties have you sold	in LA County in the last 24 months?
5. What knowledge or insight would yo	ou like to gain, to share with your community?
6. What impact would you like to see i	n your community and with your clients.
7. What should we expect from you as	a member of the Realtor Fire Safety Council?
8. Will you maintain a professional ima posts once you become part of this org	ge, integrity and discernment in your social media ganization?
○Yes ○ No	
9. Are you comfortable with photograp organization?	ohs being taken of you and posted as a part of this
○Yes ○ No	