

BROOKLYN SCHOOL OF REAL ESTATE

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BROKER ENROLLMENT FORM

DATE _____ 20__

Personal information

FIRST NAME _____ MI _____ LAST NAME _____

HOME ADDRESS _____

CITY _____ STATE _____ ZIP _____

HOME PHONE _____ MOBILE PHONE _____

WORK PHONE _____ FAX _____

E-MAIL ADDRESS _____

BUSINESS NAME AND ADDRESS _____

R.E. LICENSE NUMBER _____ LIC. EXP. DATE: _____

CREDIT CARD INFORMATION

CREDIT CARD HOLDER NAME _____

CARD TYPE _____ (VISA OR MASTERCARD)

SECURITY CODE NUMBER _____ (LAST 3 DIGIT ON THE BACK OF YOUR CREDIT CARD) ZIP CODE _____

CARD NUMBER _____ EXP. DATE _____

SIGNATURE _____

AMOUNT PAID \$ _____ BALANCE DUE \$ _____ DATE _____

HOW DID YOU HEAR ABOUT US?

NEWSPAPER _____ YELLOW PAGES _____ WEBSITE _____ FRIEND _____