

GUEST REGISTRATION



DATE _____ SITE AGENT _____

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

E-MAIL _____

PHONE-HOME _____ WORK _____ CELL _____

ARE YOU WORKING WITH A REALTOR? _____ IS YOUR AGENT WITH YOU? _____

AGENT'S NAME & COMPANY _____

(AGENTS WILL BE PROTECTED FOR 2 MONTHS FROM REGISTRATION)

TELL US ABOUT YOUR HOME!	HOW DID YOU FIND US?	REASON FOR BUYING?
Price range _____	<input type="checkbox"/> Current/former Park West Homeowner	<input type="checkbox"/> Transfer
Monthly payment _____	<input type="checkbox"/> Referral	<input type="checkbox"/> Location
Sq. foot range _____	<input type="checkbox"/> Park West Homeowner	<input type="checkbox"/> Schools
No. of Bedrooms _____	<input type="checkbox"/> Realtor _____	<input type="checkbox"/> Amenities
Special features _____	<input type="checkbox"/> Friend/Family	<input type="checkbox"/> Larger House
_____	<input type="checkbox"/> Advertisement	<input type="checkbox"/> Downsizing
_____	<input type="checkbox"/> Our website (www.parkwesthomes.com)	<input type="checkbox"/> 1 st time homebuyer
Other _____	<input type="checkbox"/> Other website _____	<input type="checkbox"/> Investment
_____	<input type="checkbox"/> Newspaper _____	
_____	<input type="checkbox"/> Homes and Land	
	<input type="checkbox"/> Drive-by/signage	
	<input type="checkbox"/> Other	

DO YOU HAVE A HOUSE TO SELL BEFORE YOU BUY? _____

IF SO, IS IT PRESENTLY ON THE MARKET WITH A REALTOR? _____

HAVE YOU BEEN PRE-APPROVED FOR A LOAN? _____ IF SO, WITH WHOM _____