



## Communication Consent Form

Name: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_ ZIP Code: \_\_\_\_\_

E-mail: \_\_\_\_\_

Contact Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

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I understand that by providing the information above, I consent to receive communication, advertisements, and solicitations sent by or on behalf of the Greater Gateway Association of REALTORS®, Illinois Association of REALTORS®, and National Association of REALTORS®. I understand that this information will not be shared with or sold to other organizations.

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I consent to accept communication from the Greater Gateway Association of REALTORS®.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_