



Greater Los Angeles Chapter No. 6

IREM Institute of Real Estate Management

Event Name: _____ Date: _____

Member Type: _____

Name: _____ Title: _____

Company: _____

Address: _____ City/Zip: _____

Telephone: _____ Fax: _____ Email _____

Payment Method: Credit Card _____ (Circle one) Visa MasterCard AMEX **Check** _____ (payable to IREMLA)

Name on Card: _____

Credit Card Number/Type _____ Exp. : _____

Billing Zip Code: _____ Total Charge: _____

Signature of Card Holder _____

Mail or FAX Registration Form to: IREM LA

350 South Figueroa Street, Suite 121, Los Angeles, CA 90071 Tel: (213) 633-1990

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**Please think green, Register online
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