

WRA CONFERENCE SPEAKER Registration Form



SPEAKER INFORMATION

DATE:

FULL NAME

FIRM / COMPANY

TITLE

CONTACT INFORMATION

ADDRESS

CITY

STATE

ZIP CODE

PHONE

EMAIL ADDRESS

WORKSHOP(S) PROPOSED

TITLE

LENGTH

FEES

DESCRIPTION

TITLE

LENGTH

FEES

DESCRIPTION

LIST OF RECENT SPEAKING ENGAGEMENTS (THREE REQUIRED, INCLUDE CONTACT INFORMATION)

CLIENT 1:

CLIENT 2:

CLIENT 3:

DEMO VIDEO URL:

SUBMISSION INSTRUCTIONS

Please complete this form ENTIRELY and fax or email it to Kristi Mikalsen, VP, Business Services for consideration.

WISCONSIN REALTORS® ASSOCIATION

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