



# 2018 COMMUNICATIONS COMMITTEE APPLICATION

(PLEASE TYPE OR PRINT BELOW)

NAME: \_\_\_\_\_

Check one: REALTOR® \_\_\_\_\_ AFFILIATE \_\_\_\_\_

YEAR JOINED: \_\_\_\_\_ SRAR MEMBER NUMBER: \_\_\_\_\_

**COMMITTEE DESCRIPTION:** Establishes and maintains ongoing two-way communications between the association and its members through all means available including but not limited to, online, social media, print and in-person. Identifies topics, information and industry news to be communicated to the membership and constantly monitors communication vehicles to evaluate their effectiveness. ***Must serve on another standing committee to be considered.*** Email the completed form to Elizabeth de Carteret, [elizabethd@srar.com](mailto:elizabethd@srar.com) , or fax: 818-786-4541.

Do you currently serve on this committee?:      Y \_\_\_ N \_\_\_

Comments: (Optional – Include any information we should know regarding your committee qualifications.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please indicate your mailing preference      \_\_\_ Office      \_\_\_ Home

OFFICE ADDRESS

HOME ADDRESS

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

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

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

City/State/Zip: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Phone: \_\_\_\_\_

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

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

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