



## REGISTRATION

DATE: \_\_\_\_\_  
NAME: \_\_\_\_\_  
HOME ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ ST: \_\_\_\_\_ ZIP: \_\_\_\_\_  
CURRENT NEIGHBORHOOD / COMMUNITY: \_\_\_\_\_  
CELL PHONE: \_\_\_\_\_  
HOME PHONE: \_\_\_\_\_  
WORK PHONE: \_\_\_\_\_  
EMAIL ADDRESS: \_\_\_\_\_

*Pursuant to the Colorado No-Call Act, I hereby give consent for Koelbel and Company employees to \_\_\_\_\_Phone, \_\_\_\_\_Fax, \_\_\_\_\_Email, as noted herein.*

*How did you hear about Colonnade Communities?  
Please circle all that apply.*

*Newspaper   Signs   Direct Mail   Broker   Website   Radio   Referral   Other*

*What price range do you have in mind for your new home?*

*When do you want to move?*

*Circle One:*

*Do you currently own or rent?   Single Family Home   Townhome   Condo   Duplex   Apartment   Other*

*Notes/Comments:*

*Thank you for taking time to fill out a registration card. We value your feedback. The information herein provided will not be shared or distributed outside of Koelbel and Company.*

# KOELBEL

