

LAND TITLE ASSOCIATION OF COLORADO

Member Profile

Type of Membership: Agent \_\_\_\_\_ Insurer \_\_\_\_\_ Associate \_\_\_\_\_ Abstractor \_\_\_\_\_ Individual \_\_\_\_\_

If Agent, Name of Underwriter: \_\_\_\_\_

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

County or Counties you operate in: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ License No. \_\_\_\_\_

A copy of the Land Title Association of Colorado membership directory will soon become available online. Please check here \_\_\_\_\_ if you **DO NOT** wish to have your company name and contact information appear in the online directory.

1. General Membership Contact Person: \_\_\_\_\_

Business Address: (if different than above) \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

State House Representative: \_\_\_\_\_ [ ] State Senator: \_\_\_\_\_ [ ]

Congressperson: \_\_\_\_\_ [ ]

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

(this information is for the sole purpose of identifying your state and local representatives, and will remain confidential)

2. Education Contact Person: \_\_\_\_\_

Business Address: (if different than above) \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

State House Representative: \_\_\_\_\_ [ ] State Senator: \_\_\_\_\_ [ ]

Congressperson: \_\_\_\_\_ [ ]

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

(this information is for the sole purpose of identifying your state and local representatives, and will remain confidential)

3. Legislative and Regulatory Contact Person: \_\_\_\_\_

Business Address: (if different than above) \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

State House Representative: \_\_\_\_\_ [ ] State Senator: \_\_\_\_\_ [ ]

Congressperson: \_\_\_\_\_ [ ]

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

(this information is for the sole purpose of identifying your state and local representatives, and will remain confidential)

Please list any additional Colorado Legislators or members of Congress with whom you are acquainted. Please rate the extent of familiarity from 1-5, with 5 being a close relationship.

\_\_\_\_\_ ( ) \_\_\_\_\_ ( )

We appreciate you taking the time to fill out this member profile so that we can continue to keep the most updated files on our members. Please don't forget to have the Branch Office Profile Form filled out for each branch office of your company. Thank you.