

**New Client Registration Form** (please provide all information)

**Please FAX completed form to (866) 924-5553**

Upon receipt we will contact you with ordering information



**Questions? Call:**

**(916) 899-4265 or toll-free (866) 632-2757**

**Contact Information:**

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

Office Phone: \_\_\_\_\_ Address: \_\_\_\_\_

FAX Line: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Zip Code \_\_\_\_\_

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

Other Contact: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Note: Which phone number would you like Virtual Tour visitors to use when contacting you? (check one only)**

Cell     Office     Other: \_\_\_\_\_

**Tour Processing Details (used for uploading to MLS, Realtor.com, etc.):**

MLS Public ID: \_\_\_\_\_ Broker Code: \_\_\_\_\_

Webmaster Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Webmaster Email: \_\_\_\_\_

Website URL (Your Web Address): \_\_\_\_\_ User Name/Password: \_\_\_\_\_

Primary Zip Codes (up to 5): \_\_\_\_\_  
\_\_\_\_\_

**Billing Details:**

**I understand that this is a Do-it-Yourself program. VTi will debit my credit or debit card \$150 per month.**

Card Type:  Visa     MasterCard     American Express     DiscoverCard

Name on Card: \_\_\_\_\_ Card Number: \_\_\_\_\_

Billing Address: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Billing City: \_\_\_\_\_ State: \_\_\_\_\_

Zip Code: \_\_\_\_\_ Security Code (3 digit) \_\_\_\_\_



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