

ARE YOU READY TO EARN LOYALTY FROM BUYERS? ↓



In a buyer's market, it takes more to close a deal than just meeting clients and showing houses. Consumers today expect full service from their REALTOR®. Earning ABR sets you apart from the rest, because you learned the necessary tools to earn buyer's loyalty. Show them you ARE a TRUE PROFESSIONAL... Become an ABR!

Presented by the North Shore Barrington Association of REALTORS® in conjunction with: Illinois Association of REALTORS®, the Real Estate Buyer's Agent Council (REBAC), and the National Association of REALTORS®



Lori Cox, REALTOR®

GRI, CRS, CRB, SRES, ePRO, ABR

Current ABR Designees may audit this course for \$175.00

Completion of course includes 6 hrs elective CE credit (RB 773)

The overall goals of the ABR® Designation Course are to:

- Prepare real estate professionals to thoroughly represent buyer-clients in real estate transactions and provide the quality of service and degree of fidelity to buyers, which sellers have customarily enjoyed.
- Offer ideas and methods for building a buyer representation business.
- Develop a self-customized tool for conducting a buyer counseling session.

Upon completing the two-day course and successfully passing the exam, you will have achieved [ABR® candidate status](#), a three-year period during which you must fulfill the educational and experiential requirements to **become an ABR® Designee**. There are currently 16 courses you can select from to complete your elective course option. [Download the career path](#) to see them all!

February 16 & 17, 2012

TIME: 8:30am – 5pm

LOCATION:

NSBAR Northbrook Office
450 Skokie Blvd, Bldg 1200
Northbrook, IL 60062

INSTRUCTOR:

Lori Cox

TUITION:

NSBAR Members: \$295.00
IAR Members: \$325.00

REGISTER:

Contact: Rachel Neally
Email: education@nsbar.org
Phone: 847-480-7177
Online: www.nsbar.org/events.aspx
Fax: 847-480-7362

PLEASE PRINT CLEARLY! ILLEGIBLE FORMS WILL NOT BE PROCESSED!

Student Information

Name: _____ MRED ID: _____
Company Name: _____
Address: _____
Cell Phone: _____
Email: _____
NRDS ID#: _____
License #: _____

If you have disabilities that require special accommodation, please advise upon registration.

Payment Information

AMEX DISCOVER MASTER CARD VISA (circle one)
CHECK (enclosed)
Credit Card: _____

Expiration Date: ____/____/____

Credit card billing address: _____

Signature: _____
