



# Legacy Sale Buyers Registration

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

HOME PHONE \_\_\_\_\_ WORK PHONE \_\_\_\_\_

DRIVERS LICENSE \_\_\_\_\_ STATE \_\_\_\_\_

SOC SEC # \_\_\_\_\_ BIRTHDATE \_\_\_\_\_

E-MAIL \_\_\_\_\_

SIGNATURE \_\_\_\_\_

\*\*\*\*\*

BANK \_\_\_\_\_

CITY & STATE \_\_\_\_\_

This Buyers Registration Form must be filled out and returned if you are interested in bidding over the phone. You must also email a copy of your drivers license.

E-mail to:  
Jennifer Anderson at [triauction@aol.com](mailto:triauction@aol.com)