

Sponsorship Contract



My company, _____, *agrees to sponsor the Chamber event described below and understands that it will receive the sponsorship benefits outlined in the Sponsorship Opportunities catalog.*

I will sponsor (name and sponsorship level of event):

_____ in (month/year) _____

The amount or value of the sponsorship is \$ _____

Method of Payment *(check one)*

Payment is enclosed (make checks payable to Gwinnett Chamber)

Charge my credit card:

VISA

MasterCard

American Express

Discover

Account Number _____ Exp. Date _____

Name on Account (print clearly) _____

Signature _____

Billing Address: _____

I will provide the following "in kind" goods or services* for the event:

* Trade must be accompanied by supporting documentation (IRS requirement). Trade **MUST** equal sponsorship value.

Coordinating participation in this event from our company

Name/Title		
Firm Name		
Mailing Address		
City/State/Zip		
Phone	Fax	Email

Required Signatures *(I understand that by providing the information above, I agree to receive communication from the Gwinnett Chamber.)*

Company Representative	Contract Date
Volunteer/Staff initiating application	Date
Senior VP of Membership	Date
CFO	Date

For Chamber Use Only:

Member # _____

Deposit Date _____

Accounting Initials _____

Distribution:

ORIGINAL: Accounting

Department Affected

Membership Development

Staff Referral (if applicable)