



## SPONSOR APPLICATION AND CONTRACT

Old Post Office Chicago, IL September 17, 2020

CONTACT INFORMATION	SPONSORSHIP SELECTIONS		
Please print or type: (List name or company/organization, division, if any, and mailing and street address).	Please indicate your sponsorship choice below: (Please select one).		
Full Name	PREMIER – \$10,000 (limited to 4)		
	GOLD – \$7,500 (limited to 8)		
Title	SILVER – \$5,000 (limited to 9)		
	BRONZE - \$2,500 (limited to 11)		
Company/Organization	SPONSORSHIP DETAILS		
Division (if any)	Name of Sponsor (As you prefer on all communications and at the Chicagoland Risk Forum.)		
Address	Total Sponsorship Cost		
City State Zip			
Phone	RETURN CONTRACT TO: Risk Management Society – Chicago Chapter Ms. Maggie Divarco Chapter Administrator 318 Half Day Road Buffalo Grove, IL 60089		
Email	Phone: 847-543-4842 Email: mdivarco@comcast.net		
Company Website			
Authorized Signature Date			

*PAYMENT INFORMATION*						
Check	Credit Card:	Visa	Maste	erCard	American Express	Discover
Credit Card Number Exp. Date (mm/yy) CCV# Billing Address (if different from above)						
Print Name as it ap	pears on credit card			Signatu	re	