



Arizona Sols Honda del Sol Car Club Sponsorship Application Form

CONTACT INFORMATION		
Name:		
Title:	Phone:	
Cell:	Fax:	
Email:		
Company Name:		
Address:		
City:	State:	ZIP Code:
COMPANY INFORMATION		
Nature of Business:		
No. of Employees:	Date Company Started:	
SPONSORSHIP INFORMATION		
Preferred Sponsorship: <input type="checkbox"/> Gold <input type="checkbox"/> Silver <input type="checkbox"/> Bronze		
Would you like a meet held at your place of business? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A (Gold Sponsorship Level Only)		
If YES, please indicate date and location if known:		
SIGNATURES		
I affirm the information provided on this form is true and correct to the best of my ability. I also have authorization as to my position to represent the company.		
Signature of Contact:	Date:	
Printed Name:		
OFFICE USE ONLY		
Terms of Sponsorship		Amount Due
Date Start	Date End:	Send Invoice
<input type="checkbox"/> Approve <input type="checkbox"/> Decline		
Initials		