

2018-19 Chamber Support Initiative Sponsor Commitment Form

Sponsor Contact Information:

Company_____

Representative_____

Billing Contact_____

Address_____

City_____ State_____ Zip_____

Phone_____ Fax_____

Email _____

Company Representative Signature: _____

Sponsorship Commitment:

Name of Sponsorship_____

Sponsorship Level _____

Special Instructions_____

Sponsorship Cost \$ _____ Date Preference_____

If Applicable

Chamber Representative Information:

Chamber Member Name _____

Please deliver the completed form to:

Nacogdoches County Chamber of Commerce

2516 North Street

Nacogdoches, Texas 75965-3518