SPONSORSHIP FORM



Chicago Chapter

YOUR INFO	RMATIO	N		
Company Name				
Contact Person				
Company Website				
SPONSORS	SHIP INFO	RMATION		
Event 1 :				
Amount :				
Event Giveaway :				
vent diveaway				
Event 2 :				
Amount :				
Event Giveaway :				
yment Method :	Check		Credit Card	
Credit Card # :				
		6107	Dillian 7' O. I	
Exp Date:		CVV	Billing Zip Code	
More Information :	#100_4200 Chi	2200 II 60647		
1658 N Milwaukee Ave #100-4290 Chicago, IL 60647 312-616-9400 (Office) / sarah@ccai.org				

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