

Corporate Sponsor Agreement

Fax #: 585-8016

Tulsa Metro Chamber
Two West Second Street, Suite 150, Tulsa OK 74103

Sponsor Information

Company _____
Authorized Representative _____
Billing Contact _____
Address _____
City _____ State _____ Zip _____
Contact Person _____ Phone _____
Email _____ Fax _____

Sponsorship

Company agrees to the following sponsorship in return for the recognition thereof by the Tulsa Metro Chamber.

Name of Sponsorship _____
Sponsorship Level Presenting Sponsor Host Sponsor Gold Sponsor
 Silver Sponsor Bronze Sponsor Table Sponsor
 Other _____

Amount of Sponsorship \$ _____ Date Preference _____
(If Applicable)

Volunteer Information

Volunteer's Name _____ Date _____

Approvals/Confirmations

(Upon approval of the authorized representatives, this is a binding agreement.)

Authorized Company Representative _____

Authorized Chamber Representative _____