

CCBR AFFILIATE APPLICATION

Company Name: _____

Address: _____

Website: _____

Type of Business: _____ (Mortgage Co., Attorney, Home Inspector, etc.)

Members:

Name: _____ Name: _____ Name: _____ Name: _____

Email: _____ Email: _____ Email: _____ Email: _____

Phone: _____ Phone: _____ Phone: _____ Phone: _____

Affiliate Membership Type (Circle):

BASIC

BRONZE

SILVER

GOLD

PLATINUM

Additional Sponsorships:	Mark which you are interested in. A member of the Golf Committee will contact you.		Notes:
GOLF Snack Cart			
GOLF Breakfast			
GOLF Hole Sponsorships*			
GOLF Putting Contest			

Name of Contact: _____

Phone: _____

Email: _____

Contact Signature

Amount Paid: _____

Check #: _____