



River North Residents Association
www.rivernorthresidents.com info@rivernorthresidents.com

APPLICATION FOR SPONSORSHIP

Part I – Contact Information

Entity Name: _____
Address: _____
City: _____ State: _____ Zip code: _____
Phone: _____ Fax: _____
E-mail: _____ Web Site: _____

Part II – Sponsor Entity Information

Year Established: _____ Not-For-Profit Entity Yes No
Category (check all that apply): Commercial Entity Trade Association Charitable Organization
Number of Employees: _____ N/A Number of Members: _____ N/A
Number of Volunteers: _____ N/A Number of Locations: _____ N/A
General description of Mission/Purpose:

Part III – Membership Offers

If the Sponsor will make any type of special offer available to RNRA Members, please describe:

Part III – Authorization

Official Representative: _____ Title: _____
Phone: _____ Fax: _____
E-mail: _____ Web Site: _____

I hereby attest that the above information is accurate to the best of my knowledge and that I have read and accept the provisions regarding sponsorship of the River North Residents Association as presented.

Signature _____ Date: _____

Please print, complete and submit this sponsorship application to the Secretary of the RIVER NORTH RESIDENTS ASSOCIATION Board via fax at (312) 624-7966. Please see enclosed invoice for fee payment instructions. Thank you.