

www.hptabr.org April 13-15, 2018

SPONSOR AGREEMENT

Yes, our	company will help the 2018 Highland Oper	n benefiting The Cystic Fibros	is Foundation.	
Compan	ny Name:			
Compan	ny Representative:			
Mailing	Address:			
City: _		State:	Zip:	
Phone:	Fax:	E-mail:		
	We will be aSponsor at \$			
	We will provide a banner no later than March 31, 2018, if applicable.			
We will provide company information and/or items (such as pencils, notepads, etc) for the players' goody bags no later than March 31, 2018, if applicable. (275 needed).				
Please n	ote:			
	our sponsor level is \$1000 or more, please ϵ oon as possible for inclusion on the tournament		LisaSanner@hptabr.org	
Payme	ent Information:			
□ <u>Onlin</u>	ne payment by credit card now available at www	v.hptabr.org.		
	nent by Check: Please make payable to the Cys Foundation,10532 South Glenstone Place, Ste		te this form and mail to Cy	estic
	nent by Credit Card: Complete the form a shown above. If you prefer, you may mail			
	aster Card □ VISA □ Discover □ Ame	rican Express Other		t 4 Digits of Credit Card
Name on	n Credit Card:			
Address	Statement mailed to if different from above	2		
Signature	e:			
Card # _		Expiration Da	te:	