

LEGAL BUSINESS NAME (INDIVIDUAL, PARTNERSHIP, ASSOCIATION OR CORPORATE)

SIGNATURE OF AUTHORIZED REPRESENTATIVE





CAPRI COMMUNITIES 20875 Crossroads Cir., Suite 400 Waukesha, WI 53186 P: 262-798-1224 capricommunities.com

NAME FOR LISTING & BOOTH SIGN

Wednesday, June 21, 2023 | Brookfield Conference Center

B2B SPONSORSHIP REGISTRATION & CONTRACT

CONTACT NAMES		EMAIL ADDRESSES		
ADDRESS	CITY	STATE		ZIP
PHONE				
WISCONSIN TAX ACCOUNT NUMBER	(15 DIGITS)			
B2B Sponsorship F	Pricing			
LEVEL	DESCRIPTION			
Partner	Sponsor our post-event reception with recognition for your company		_	\$2,500
Friend Sponsor our post-event reception with recognition for your		ion for your company	_	\$1,000
			TOTAL:	
tortuous acts, errors or omission PAYMENT TERMS: Non-refundab	rted or claims by any person, firm, entity, corporation, politi is of vendor in its agents, employees, sub-contractors, or invole deposit of 25% is due when contract is turned in to reser rship. ACCEPTANCE: Capri Communities reserves the right to standards.	itees, provided for herein and arising out ve sponsorship. Full balance is due by Ma	of the performance of t y 1, 2023. Failure to pay	this agreement. balance will result
Method of Payment: Credit Card Check Enclosed Wire Transfer If you'd like to pay by credit card, let your rep know and they will send you a secure link to the payment portal. Please note, payment will be due in full with this method.		OFFICE USE ONLY RECEIVED BY:		
Please make checks payable to Chiara Communities Foundation Inc, a tax-exempt organization as described in Section 501(c)(3) of the Internal Revenue Code; EIN 83-1251876. Wire Transfer Instructions: BANKING INSTITUTION: Wells Fargo Bank BANK'S ABA NUMBER: 121000248 CREDIT ACCOUNT OF: Chiara Communities, Inc ACCOUNT NUMBER: 4810039115		PAID BY CHECK #		

DATE