



Please fill out the **PureMAPP Container Sponsorship** form below and either email it to kcichon@comprenew.org or fax it to Kristen at 616.451.1800.

Business Name: _____

Company Representative: _____ Title: _____

Address: _____

City/State/ZIP: _____ Date: _____

Phone: _____ Fax: _____ Email: _____

**Help build a safer, healthier environment for all by
choosing one of the corporate sponsorships below.**

Corporate Sponsorships:

This is an investment with a long term payoff. (Approximately 10 years.)

- Gold Sponsorship - \$10,000**
- Silver Sponsorship - \$8,000**
- Bronze Sponsorship - \$5,000**
- Copper Sponsorship - \$2,000**

Please email your company logo to Kristen at kcichon@comprenew.org.

Your logo must be at least 300 dpi and in a jpg or eps format.

Please contact Kristen with any questions at 616.451.4400.

Payment Information

Check

Checks should be made payable to Comprenew.

Total \$ _____ Check # _____

Please mail check to: Comprenew
Attn: Gail Gibbard
Ionia Ave. SW, Grand Rapids, MI 49503

Credit Card

Charge my: VISA MasterCard American Express

Account #: _____

CVV Code: _____ Exp. Date: _____
(3-4 digit security number on the back of the card)

Cardholder Signature: _____

Cardholder Name (print): _____