

## CONTACT INFORMATION

**Please print or type:**  
*(List name or company/organization, division, if any, and mailing and street address).*

Full Name

Title

Company/Organization

Division (if any)

Address

City State Zip

Phone

Email

Company Website

Authorized Signature Date

## SPONSORSHIP SELECTIONS

**Please indicate your sponsorship choice below:**  
*(Please select one).*

**PREMIER – \$10,000 (limited to 4)**

**GOLD – \$7,500 (limited to 8)**

**SILVER – \$5,000 (limited to 9)**

**BRONZE – \$2,500 (limited to 11)**

## SPONSORSHIP DETAILS

**Name of Sponsor**  
*(As you prefer on all communications and at the Chicagoland Risk Forum.)*

**Total Sponsorship Cost**

**RETURN CONTRACT TO:**  
**Risk Management Society – Chicago Chapter**  
 Ms. Maggie Divarco  
 Chapter Administrator  
 318 Half Day Road  
 Buffalo Grove, IL 60089  
 Phone: 847-543-4842  
 Email: [mdivarco@comcast.net](mailto:mdivarco@comcast.net)

## \*PAYMENT INFORMATION\*

Check	Credit Card:	Visa	MasterCard	American Express	Discover
Credit Card Number Exp.	Date (mm/yy)	CCV#	Billing Address (if different from above)		
Print Name as it appears on credit card			Signature		