

## Sponsor Agreement: HBA Remodelers Council Holiday Party

Company Name:	Contact:	
Address:	City:	Zip:
Phone: E	mail:	
You must be a member of the H	IBA Remodelers Council to sponsor t	:his event!
<ul> <li>Advertisement at the part</li> </ul>	p your company will be promoted in t rty (logo artwork provided by the spo d hand out information about your o	onsor)
I understand and agree to	o sponsor this event for the amour	nt of \$200.00
Authorized Signature:	Date:	
HBA Representative:	Date:	
You can pay for your sponsorship o	ees must be paid in advance of the exonline: https://cshba.com/events/remodeact Johanna Hillgrove - johanna@cshba.c	elers-council-holiday-party/
Check Date:	Check Number:	Amount:
		Exp. Date
Card #		
Card #		———— Security Code
Name on Card		——— Security Code