

2020

Membership Application

Let's Team Up!

Date: _____

Business Name: _____

Contact: _____

Address: _____

City: _____ State: _____ Zip: _____

E-mail: _____

Business Phone: _____ Cell Phone: _____

Website: _____

Sponsorship Level:

(Check One)

..... \$500

..... \$2,500

..... \$5,000

..... \$7,500

..... \$10,000

..... Customize

\$

Custom Options

Payment Options:

(Please Make Checks Payable to North Platte Visitors Bureau)

Check

\$ _____ # _____

Invoice Me

In-Kind

Sponsor Signature: _____

Title: _____ Date: _____

Signature: _____

NPVB



**NORTH PLATTE
AREA SPORTS
COMMISSION**

PLAYNORTHEPLATTE.COM