



APWA – Minnesota Chapter Sponsorship Program

2019 Enrollment Form

Sponsor Information

Name of Organization: _____

Street Address or P. O. Box: _____

City: _____ State _____ Zip _____

Primary Contact: _____

Title: _____

Phone No.: (_____) _____

Fax No.: (_____) _____

Email: _____

Sponsorship Type *(please check appropriate box)*

PLATINUM
\$975/year

GOLD
\$725/year

SILVER
\$475/year

Gold Sponsors...please indicate your choice below:

Summer Golf Outing

Fall Conference Exhibit

Please make your check payable to:
APWA-MN Chapter

Remit payment with this sponsorship form to:

Pat Schutrop, Chapter Assistant
APWA-MN Chapter
PO Box 46266
Eden Prairie, MN 55344

Thank you for your participation!