



NAWBO-Charlotte Member Partner Agreement

Today's Date: _____

Name: _____

Company: _____

Address: _____

Phone: _____ Fax: _____

Email: _____

Partnership Level:

Please circle which partnership level you would like.

Success Partner
\$1,000

Strength Partner
\$500

Spirit Partner
\$250

Payment:

- Payment Enclosed (please make check or money order payable to NAWBO-Charlotte)
 Send Bill Charge To: Visa Mastercard American Express

Account #: _____ Expires: _____

Signature: _____

Partnership will commence and be announced upon receipt of payment. Payment may be enclosed with application or an invoice may be mailed according to information on this completed application. Please indicate below the contact for invoice if other than above.

Name: _____

Phone: _____ Fax: _____

Email: _____

Your company's logo in electronic format is necessary for all partner levels. Since it will be used in both color and black and white, please provide both versions. *Requirements: JPG at 300ppi and at least 2 inches wide; or vector EPS or native Illustrator file.*

Submit logo files via email to: nawbo@nawbocharlotte.org

**Mail Or Fax This Completed Form To:
NAWBO-Charlotte, 1800 Camden Road, Suite 107, #44,
Charlotte, NC 28203, Phone (704) 367-3454, Fax (815) 371-1499**