

# Central Texas Chapter



AIR & WASTE MANAGEMENT  
ASSOCIATION

## SPONSORSHIP RECEIPT

### I. SPONSOR INFORMATION

|            |       |             |       |
|------------|-------|-------------|-------|
| Last Name: | _____ | First Name: | _____ |
| Company:   | _____ | Title:      | _____ |
| Address:   | _____ | Work Phone: | _____ |
|            |       | Cell Phone: | _____ |
| City:      | _____ | State:      | _____ |
| Zip Code:  | _____ | Fax:        | _____ |
|            |       | E-Mail:     | _____ |

### II. SPONSORSHIP AMOUNT

Categories:

- Chapter Business/Operations Support.
- Catering during Chapter Meetings/Presentations/Events.
- Venues/Transportation/Facilities Support.

Comments/Earmarking: \_\_\_\_\_

\_\_\_\_\_

### III. Referral

Referred by (Name of A&WMA Member): \_\_\_\_\_

### IV. PAYMENT METHOD

- Check enclosed (Central Texas Chapter of A&WMA)
- Cash
- Credit Card

TOTAL AMOUNT \$ \_\_\_\_\_

DATE: \_\_\_\_\_