



Richmond Claims Association
2009 Annual Picnic Sponsor Application

**** Please print or type - one form per sponsor ****

Company _____

Contact Name _____

Title _____

Mailing Address _____

Telephone _____ Fax _____

Email _____ Website _____

**** Company Name - as you would like it to appear on sponsor list (please print clearly) ****

Please complete the information below:

Sponsorship Level:

() Grand Sponsor - \$500

() Co-Sponsor - \$250

() Honorable Sponsor - \$100

() Door Prize Donation - _____ gift _____ monetary (amount \$ _____)

Payment Information:

Amount Enclosed \$ _____ (payable to The Richmond Claims Association)

() check - # _____

() cash

() receipt requested

MAIL or FAX your form **by July 10, 2009** to:
Stacy Davis, Richmond Claims Association, Virginia Farm Bureau Ins. Co.
12580 West Creek Parkway, Richmond VA 23261
(Fax: 804-290-1292).

Should you have any QUESTIONS?
Please contact Stacy Davis at (804) 290-1442 or sdavi@vafb.com