

2022 SPONSORSHIP APPLICATION

SoCal Chapter

SoCAL CHAPTER							
Sponsor Leve	el .						
■ Diam	ond Pl	atinum	■ Gold	■ Silver	■ Bronze		
Company Pro	ofile						
NAME OF COMPANY	Y SPONSOR CONTACT		CONTACT	TITLE			
ADDRESS (Street addres	s, Ste. #, City, State/I	 Province, Zip/Posta	l Code)				
PHONE	FAX	FAX EMAIL			WEBSITE		
 A brief paragraph, Your logo in vector The e-mail address 	-based Adobe Illu	istrator or an EPS	3	e inquiries from viev	vers		
SPONSOR MEMBERS	ADD	RESS/CITY/STATE	ZIP	PHONE	EMAIL		
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							
Reminder: Diamond =	8 Memberships, Pl	atinum = 6 Membe	erships, Gold = 4 M	emberships, Silver = :	2 Memberships, Bronze = 1 Me	mbership	
Payment Info	rmation						
■ VISA ■	MasterCard	rd ■ AMEX ■ Discover		Please inc	Check Enclosed (payable to NAIOP) Please include application with check. Do not fax application and/or copy of check as it will not be		
Credit Card Number	Exp. Date	Exp. Date		processed without actual payment.			
Name of Cardholder	of Cardholder CVV			Signature	Signature		
Billing Address (if different from contact information)				Authorized	d Amount Date		



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