

MICHIGAN COUNCIL OF WOMEN IN TECHNOLOGY (MCWT)
SPONSORSHIP APPLICATION



SPONSOR INFORMATION

Company Name: _____

Address: _____
Street City Zip Code

Sponsor Name: _____ Title: _____

Level of Sponsorship & Donations: PLATINUM \$10,000 GOLD \$5,000 BRONZE \$1,000 OTHER \$ _____

PAYMENT OPTION DESIRED (3 CHOICES ~ CHECK ONE)

- 1. Charge My Credit Card
Credit Card Information _____
Type Number Expiration Name on Card
- 2. Check Enclosed
Please make payable to : **Michigan Council of Women in Technology**
- 3. Invoice Me

Return Sponsor Application to: **Michigan Council of Women in Technology**
P.O. Box 214585
Auburn Hills, MI 48321

PLEASE PRINT ALL INFORMATION

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