

Section 4. Sponsorship Form

Your sponsorship of just \$50 a year will place your businesses information in our monthly newsletter in the Sponsor Directory. Your place of business will get 12 issues of our great monthly newsletter or if you would like we can e-mail you the electronic version.

	e-mail you the electroni	C VCISIOII.	
The information in bold	l will be used in the dir	ectory.	
Company Name:			
Street Address:			
City:	State:	Zip Code:	_
Phone:	Web Address:		
ABATE Member Disco	unt? No 🗆 Yes 🗆	% or \$ off	
Hours of Operation	Type of Busin	ess:	
Mailing Address (If diffe	erent than above)	,	
City:	State:	Zip Code:	
Contact Dorson:			
Contact Person.		E mail:	
Phone Number:		E mail:	
Phone Number:			
Phone Number: Receive the monthly ne	wsletter via e-mail Yes	□ No □	
Phone Number:	wsletter via e-mail Yes		
Phone Number: Receive the monthly new Receive the Mon	wsletter via e-mail Yes wsletter via standard n	□ No □	
Phone Number: Receive the monthly new You can pay by cash or company to the monthly new You can	wsletter via e-mail Yes wsletter via standard n	□ No □ nail service Yes □ No □	
Phone Number: Receive the monthly new You can pay by cash or callow four weeks to proceed ABATE of SC, Inc	wsletter via e-mail Yes wsletter via standard n check payable to ABATE ess your application.	□ No □ nail service Yes □ No □	
Phone Number: Receive the monthly new You can pay by cash or callow four weeks to proceed ABATE of SC, Inc PO Box 5891 West Columbia, SC 2917	wsletter via e-mail Yes wsletter via standard n check payable to ABATE ess your application.	□ No □ nail service Yes □ No □	below and please