

**GENERAL INFORMATION**

Company Name: \_\_\_\_\_ Contact Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
E-mail: \_\_\_\_\_ Company Website Address: \_\_\_\_\_  
Referred by (if applicable): \_\_\_\_\_

**SUPPORTING PARTNER LEVEL**

PLATINUM PARTNER (\$8,000)  GOLD PARTNER (\$6,000)  SILVER/ENERGY PARTNER (\$4,000 / \$5,000)

**PAYMENT INFORMATION**

Company Check (make check payable to BOMA San Diego): Check #: \_\_\_\_\_ For \$: \_\_\_\_\_  
Request invoice:   
Charge: Visa, Mastercard & American Express  
Card #: \_\_\_\_\_ Exp: \_\_\_\_\_  
3 Digit Security Code: \_\_\_\_\_ Name on Card: \_\_\_\_\_  
Signature: \_\_\_\_\_ Billing Zip: \_\_\_\_\_

**CHECKLIST FOR SUPPORTING PARTNERS**

- Complete and submit Supporting Partner agreement no later than December 31, 2018
- E-mail hi-res logo to: [bae@bomasd.org](mailto:bae@bomasd.org)
- Request invoice or submit credit card payment
- BOMA Membership Dues for the incoming year must be paid in full for 2019
- Sponsor payments must be paid in full by January 31, 2019

*By signing below, I understand that I am making a commitment to participate in BOMA San Diego Supporting Partner opportunities. The terms of this agreement are between January 1 through December 31, 2019. If full payment is not received, I understand the sponsorship agreement may be cancelled and I will not receive any marketing benefits.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Accepted by: \_\_\_\_\_ Date: \_\_\_\_\_

**Please Mail or E-mail Completed Form To:**

Audrey Doherty  
BOMA San Diego  
P.O. Box 121166, San Diego, CA 92112  
[bae@bomasd.org](mailto:bae@bomasd.org)  
Phone: (619) 243-1817

