



CHECK OR CREDIT CARD AUTHORIZATION FORM

Person's Name: _____

Company Name: _____

Sponsorship Level: <i>(circle one)</i>	Executive Producer	\$2,500	Director	\$ 275
	Producer	\$1,000	Assitant Director	\$ 150
	Associate Producer	\$ 500	Patriarch of the Arts	\$ 100

Ad Copy Size: <i>(circle one)</i>	Business Card	Full page
	¼ page	Full back page
	½ page	

Name on Credit Card: _____

Credit Card Number: _____

Expiration Date: _____ 3 digit code: _____
(mm-yy)

OR

Check Number: _____ Check Amount: _____
(Make checks payable to Cedar Park Rotary Club)

Sponsor's signature: _____

Date signed: _____

Please remit ad copy by Friday, April 14th, 2017 to cprotarytalent@gmail.com