

CORPORATE SPONSOR

Date _____

NEW RENEWAL

Join Us for the Time of Your Life!

(Please print)

Company Name: _____

Contact Name: _____

Address of business _____

Street, Box No. RR# Apt. # (Civic address if mailing address is different)

City

Province

Postal Code

Telephone: _____ - _____ - _____

Email _____

Fax: _____ - _____ - _____

Website: www. _____

ANNUAL SPONSORSHIP COST

Bronze \$150

Non-Profits Only

Silver \$300

Gold \$600

Platinum \$1200

Mailing: \$ _____ *if applicable*

Total: \$ _____

Vista Mailing Costs

Outside of Kingston: \$15/yr

Outside of Canada: \$36/yr

Please invoice

Cheque enclosed payable to
Seniors Association Kingston Region

Credit Card

Card Number _____

____ / ____ MasterCard
Expiry Date C V V Visa

SENIORS
ASSOCIATION

KINGSTON REGION

Visit The Seniors Centre

Monday to Friday

8:30am to 4:30pm

One of our volunteer greeters will
be happy to give you a tour.

THE SENIORS CENTRE

56 Francis St
Kingston ON, K7M 1L8

Tel: 613.548.7810

Fax: 613.531.1862

www.seniorskingston.ca

info@seniorskingston.ca