

Application Form for Event Sponsorship

Applicant Information

Company
Name: _____

Contact Person: *Last Name* _____ *First Name* _____ Job title: _____

Company
Type/Industry: _____

Company
Address: *Street Address* _____

State and City _____ *ZIP Code* _____

Phone: _____ Email: _____

Are you a CICC Member? YES NO Membership Level: Supporting / Ordinary

If NO, please indicate your relation with the CICC _____

You apply for: Full Sponsorship Partial Sponsorship Other

Category applied for: F& B Service Product

Service/Product you wish to provide

FOOD & BEVERAGE YES NO
 Please indicate below what products you wish to provide

BEVERAGE TYPE (wine, aperitivo etc)	BEVERAGE NAME	QUANTITY

FOOD TYPE (dessert, appetizer etc.)	FOOD NAME	QUANTITY

SERVICE YES NO

 Please indicate below what service you wish to provide

SERVICE TYPE (set-up, AV, entertainment etc.)	SERVICE SPECIFICATION	QUANTITY

PRODUCT for prizes (RAFFLE, LUCKY DRAW, GOODIE BAGS ETC.) YES NO

 Please indicate below what product you wish to provide

PRODUCT for PRIZES	QUANTITY

References

Have you been one of our third-party provider before? YES NO

If yes, please mention
 on which occasion: _____

Attachment

Company Presentation	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Notes:
Full Proposal	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Notes:

Disclaimer and Signature

I certify that the information submitted are true and complete.

Signature: _____ Date: _____

The information about the tendering result shall be announced on the CICC website.

THANK YOU FOR YOUR SUPPORT

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