



**STRATEGIC PARTNERSHIP AGREEMENT**

*Send completed form by:*

**Scan, Email & Attach Company Logo send to** Chapter President, Nancy Garcia  
[garciank@att.net](mailto:garciank@att.net)

**Fax to 214.919.4039** ATTN: Chapter President, Nancy Garcia

**Mail to WCR-Dallas, pm 186, 14902 Preston Rd, Ste 404, Dallas, TX 75252**

**Partner Information** (Please print clearly and complete all fields)

Company Name (as it should appear in print) \_\_\_\_\_

Your Name \_\_\_\_\_ Title \_\_\_\_\_

Company Phone \_\_\_\_\_ Direct \_\_\_\_\_

Email \_\_\_\_\_ Website \_\_\_\_\_

**Payment Method**

- Check made payable to WCR-Dallas
- Please Charge my credit card (Visa or MasterCard accepted)

Partnership Level Amount \$ \_\_\_\_\_

MCE Class Sponsorship(s) \$ \_\_\_\_\_  
(\$100 per class sponsored)

Total Partnership Investment \$ \_\_\_\_\_

Name on Credit Card \_\_\_\_\_

Card Number \_\_\_\_\_ Expiration \_\_\_\_\_

Authorized Signature \_\_\_\_\_ Date \_\_\_\_\_

Credit Card Billing Address \_\_\_\_\_

Partnership Starts: \_\_\_\_\_ Partnership Ends: **January 1, 2013**



**Partnership Level** We wish to participate at the following **ANNUAL LEVEL** and understand that payment is required at signing (see full description of partnership levels on previous page)

\_\_\_ **\$2500 Partnership**    \_\_\_ **I have attached my company logo**

\_\_\_ **I will participate in the Affiliate Spotlight Day held during the June Joint meeting with WCR Collin County at Prestonwood Country Club**

Model 1 Information

Model 2 Information

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Company: \_\_\_\_\_

Company: \_\_\_\_\_

Phone: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Email: \_\_\_\_\_

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\_\_\_ **\$1500 Partnership**    \_\_\_ **I have attached my company logo**

\_\_\_ **I will participate in the Affiliate Spotlight Day held during the June Joint meeting with WCR Collin County at Prestonwood Country Club**

\_\_\_ **Our Company would like to give the Inspiration at the \_\_\_\_\_ (insert month) luncheon meeting.**

Model 1 Information

Model 2 Information

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Company: \_\_\_\_\_

Company: \_\_\_\_\_

Phone: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Email: \_\_\_\_\_



\_\_\_ \$1000 Partnership

\_\_\_ I have attached my company logo

\_\_\_ I will participate in the Affiliate Spotlight Day held during the June Joint meeting with WCR Collin County at Prestonwood Country Club

\_\_\_ Our Company would like to lead the National & State Pledges at the \_\_\_\_\_ (insert month) luncheon meeting.

Model 1 Information

Model 2 Information

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Company: \_\_\_\_\_

Company: \_\_\_\_\_

Phone: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Email: \_\_\_\_\_

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\_\_\_ \$500 Partnership

\_\_\_ I have attached my company logo

\_\_\_ I will participate in the Affiliate Spotlight Day held during the June Joint meeting with WCR Collin County at Prestonwood Country Club

Celebrity Floor Model Information

Name: \_\_\_\_\_

Company: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

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\_\_\_ \$250 Partnership

\_\_\_ I have attached my company logo

\_\_\_ I will participate in the Affiliate Spotlight Day held during the June Joint meeting with WCR Collin County



\_\_\_\_ **\$100 MCE Class Sponsorship** for the Month(s): (circle months to sponsor)

**JAN FEB MAR APR MAY JUN JUL AUG SEP OCT NOV DEC**

I would like the MCE Class to be held:

A.) At Prestonwood Country Club before or after the WCR Dallas luncheon meeting

or

B.) Offsite at \_\_\_\_\_

**MCE Class Topic(s) You Would Like to Sponsor:**

List All Topics including presenting speaker(s) if you have someone in mind:

➤ \_\_\_\_\_

➤ \_\_\_\_\_

➤ \_\_\_\_\_