**2025 Corporate Partnership Program
INVOICE/Commitment Form**

|  |  |  |  |
| --- | --- | --- | --- |
| Contact:  |  | Title:  |  |
| Agency:  |  |
| Address:  |  |
|  |  |
| City:  |  | Zip:  |  |
| E-Mail Address: |  |
| Telephone (direct): |  |
| Website Address: |  |
| **2025 Partnership Level** *(Choose one – see Benefits Summary sheet)* |
| ⬜ | Platinum (Elected Officials Reception-April): $12,000  |
| ⬜ | Platinum (CTC Reception-May): $12,000 |
| ⬜ | Platinum (Annual Event-June): $12,000  |
| ⬜ | Platinum (TEF-October): $12,000  |
| ⬜ | Gold: $8,000 |
| ⬜ | Silver: $5,000 |
| ⬜ | Bronze: $2,000 |
| ⬜ | Copper (certified disadvantaged or small business only**\***): $1,000 ***\*please provide current certification*** |
|  |  |

Please email the following items to **Rachael Keish (****rachael@keishenv.com****) and cc:** **Admin@keishenv.com**:

1. This Completed Partnership Invoice/Commitment form
2. High-resolution, electronic file of company logo

And please send check *(****payable to WTS San Francisco Chapter)*** to:

WTS San Francisco Bay Area Chapter

1714 Franklin St. # 100-146

Oakland, CA 94612-3409

*Thank you for supporting WTS!*