

KLC CORNERSTONE PARTNER APPLICATION FORM



Firm or Organization

Primary contact to receive marketing mailings

Name

Title

Address

City/State/Zip

Telephone

Fax

Email

Website

Service Areas (please check one)

<input type="checkbox"/> Architects/Engineers	<input type="checkbox"/> Banners/Lighting	<input type="checkbox"/> Computer Software	<input type="checkbox"/> Energy/Environmental	<input type="checkbox"/> Financial Services
<input type="checkbox"/> Flags/Pins	<input type="checkbox"/> Insurance & Claims Services	<input type="checkbox"/> IT/Telcommunications	<input type="checkbox"/> Legal Services	<input type="checkbox"/> Meters/Meter Reading
<input type="checkbox"/> Office Products/Furniture	<input type="checkbox"/> Ordinance Codification	<input type="checkbox"/> Parks and Recreation	<input type="checkbox"/> Recycling/Waste Management	<input type="checkbox"/> Resource Providers
<input type="checkbox"/> Street Sweeping/Mowers	<input type="checkbox"/> Tourism/Hospitality	<input type="checkbox"/> Other _____		

Level of Participation(select one)

<input type="checkbox"/> Limestone Level - \$1,500
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<input type="checkbox"/> Marble Level - \$5,000

<input type="checkbox"/> Slate Level - \$2,500
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<input type="checkbox"/> Granite Level - \$10,000

Payment & Remittance:

Amount Enclosed: \$

<input type="checkbox"/> Check	<input type="checkbox"/> Visa	<input type="checkbox"/> MasterCard	<input type="checkbox"/> Invoice
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Cardholder Name

Account Number	Expiration Date
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Cardholder Signature

To enroll: Please complete the online application form at www.klc.org. Or complete this form and mail or fax, along with your payment and a copy of the invoice, to the Kentucky League of Cities, P. O. Box 34128, Lexington, KY 40588-4128 or fax to 859-977-3703, Attention: Raymie Scrivner.

It is understood that participation in the Cornerstone Partner Program does not constitute a Kentucky League of Cities endorsement of the firm or the products or services offered. KLC reserves the right to decline any Cornerstone Partner enrollment application. Priority for all partnership opportunities will be determined based upon level of participation.

Period of enrollment: Partnership expires one year from enrollment date.

What to send back:

If Online:

- ◆ Visit www.klc.org
- ◆ Completed Online Enrollment Application
- ◆ Credit card information
- ◆ Hard copies do not need be sent by mail or fax

If By Mail:

- ◆ Send to: Kentucky League of Cities, P.O. Box 34128, Lexington, Kentucky 40588-4128
- ◆ Completed Enrollment Application
- ◆ Payment in full or credit card information

If By Fax:

- ◆ Fax to: 859-977-3703, Attention: Raymie Scrivner
- ◆ Completed Enrollment Application
- ◆ Payment in full or credit card information