2026 Partnership/Sponsor Interest Form

Company Name:

Representative Name:

Email: Phone:

Brief Description of your product/service:

What areas are you interested in partnering?

- ☐ Monthly Luncheon – **GOLD**
- ☐ Special Activity – **SILVER**
- ☐ Bingo and Tournament Games – **BRONZE**
- ☐ Other:

Thank your for interest in partnering with the NRH Senior Center. Submit this form and Julie Adkins, Senior Center Supervisor will bein touch to schedule a meeting to discuss available opportunities.

Submit

For Office Use Only

Appt. email sent: Meeting Scheduled:

Notes:

Agreement sent: Signed agreement received: