

# INDIANAPOLIS BUSINESS BOOSTERS

## SPONSOR APPLICATION

Date: \_\_\_\_\_

Name of prospect: \_\_\_\_\_

Name of business: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip \_\_\_\_\_

Type of business: \_\_\_\_\_

\_\_\_\_\_

How long in business: \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

First Reading Date: \_\_\_\_\_ Second Reading: \_\_\_\_\_