Sponsor Form

Waswanipi Busines Development Conference 2019

Levels of Contribution

Name of Company:_____

Address: _____
City, ST ZIP Code: _____
Phone:_____ DATE: _____
Fax: _____
email: _____

DESCRIPTION	AMOUNT
Please choose which plan you want to sponsor and enlisted below; Please do not forget to attached LOGO and email to bdc@waswanipi.com	
TOTAL	$ -

Make all checks payable to "**The Cree First Nation of Waswanipi"**
Address: **1 Chief Louis Gull Waswanipi, Quebec J0Y 3C0**
If you have any questions, please feel free to contact us at **bdc@waswanipi.com**

Your investments helps launch new businesses and assist existing businesses.
Thank you!