

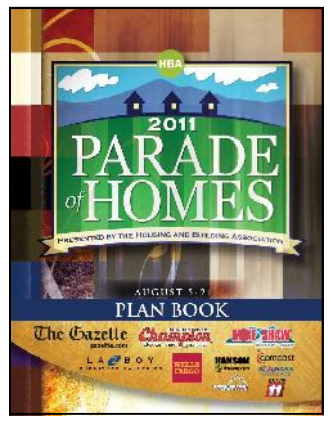


Signature Member

Housing and Building Association of Colorado Springs

Promote your company 24/7 with the HBA! As a **Signature Member**, you will be listed in the following manner:

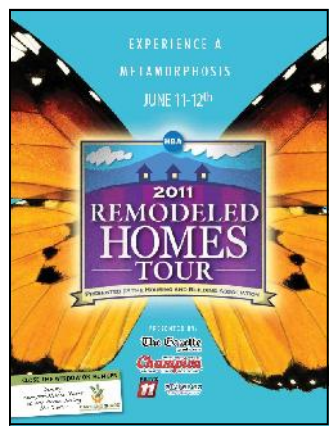
| | | |
|---|------------|---------|
| www.cshba.com | \$250/mo | \$3,000 |
| Event Sponsor—Annual Membership Reception | \$500/year | \$ 500 |
| Parade of Homes Magazine | \$200/year | \$ 200 |
| Remodeled Homes Tour Magazine | \$100/year | \$ 100 |
| Membership Directory (print copy) | \$100/year | \$ 100 |
| Membership Directory (online, enhanced listing) | \$250/year | \$ 250 |
| Annual Benefits of Membership Guide | \$100/year | \$ 100 |
| Annual Value | | \$4,250 |



In addition, receive:

- 30% discount on all additional stand alone advertising in these publications*
- Tickets to the following HBA events:

| | |
|--|---------------------|
| 10 tickets to the Grill n Chili Round Up | \$ 150 value |
| 10 tickets to the Parade of Homes | \$ 100 value |
| 5 tickets to the Parade of Homes VIP Party | \$ 500 value |
| 10 tickets to the Remodeled Homes Tour | \$ 50 value |
| 10 tickets to the Home & Garden Show | \$ 60 value |
| 5 tickets to the Holiday Party | \$ 100 value |
| | <u>\$ 960 value</u> |



Total Signature Member value \$4,250 Your cost: \$2,595 per year. Limit of 5.

**not including the Annual Membership Directory or advertising as part of a sponsorship package*

I agree to be a Signature Sponsor of the Housing and Building Association of Colorado Springs from January 1, 2012 through December 31, 2012 for a cost of \$2,595.

Company Name _____ Phone Number _____

Address _____ City/ST/ZIP _____

Name _____ Email _____

Payment method:

- Check Bill Me Charge my Credit Card (please complete the attached credit card authorization form)



Credit Card Authorization

Housing & Building Association of Colorado Springs
4585 Hilton Parkway, Suite 100 * Colorado Springs, CO 80907

If you are paying by credit card, please complete the following information - or you may pay online at www.cshba.com and click on the appropriate event

Payment For: Signature Member

Company Name _____

Phone Number _____

Address _____

City/ST/ZIP _____

Name _____

Email _____

Payment method:

Visa MasterCard Discover American Express

Amount to be charged \$ _____

Card Number _____

Expiration Date _____

Signature of Credit Card _____

Today's Date _____