



# Affiliation Application

Name of Applicant : \_\_\_\_\_

Name of Applicant Contact: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

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

\_\_\_\_\_

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

\_\_\_\_\_

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

\_\_\_\_\_

**PAYMENT: \$500.00** Effective on date payment is received.

**BY CHECK** made payable to:  
Reno+Sparks Chambers of Commerce  
4065 S. Virginia Street, Ste. #101  
Reno, NV 89509

**BY CREDIT CARD:**

Cardholder Name: \_\_\_\_\_

Card Number: \_\_\_\_\_

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

CVV: \_\_\_\_\_

**Receipt of payment will be mailed to address noted above.**

**For information or questions, contact:**

Connor Naisbitt: (775) 636-9550