



# Sponsorship Form

Phone 734-669-6371 Fax 734-627-6884  
registration@mml.org

DATE:

## SPONSOR INFORMATION

Name:  
Company Name:  
Street Address:  
City, State, ZIP:  
Phone:

## PAYMENT METHOD

Submit payment with sponsorship form

SPONSORED EVENT	DESCRIPTION	AMOUNT OF SPONSORSHIP
	2026 MAM Summer Workshop	
	Bronze Sponsor	\$
	Silver Sponsor	\$
	Gold Sponsor	\$
	Platinum Sponsor	\$
<b>TOTAL SPONSORSHIP AMOUNT</b>		<b>\$</b>

Authorized by: \_\_\_\_\_  
(Name & Title)

**Mail payment and form to:**  
Michigan Association of Mayors  
PO Box 7409 Ann Arbor, MI 48107

**Thank You for Your Support!**