



Corporate Sponsor Application

Please print information requested below:

Check one: New Renewal Address Change

Name: _____

Job Title: _____

Company/Corporate Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Company/Individual's Name
for Publication in La Palabra: _____

Signature: _____

Date: _____

**Annual Corporate Sponsor Fee is \$250
Make Check/Money Order Payable to NHCFAE**