

AVI Africa



SPONSORSHIP FORM

FIRST NAME & SURNAME		
COMPANY NAME		
POSTAL ADDRESS		
		CODE
COUNTRY		
TELEPHONE NUMBER		
FAX NUMBER		
CELL NUMBER		
E-MAIL ADDRESS		
VAT NUMBER		
COMPANY ORDER NO		
AMOUNT	R	
OTHER		

Please Note: Sponsorships are payable on/or before 29th of April 2017.

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SIGNATURE

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DATE