

2020

Patron Application Form



**Hampshire Care
Association**
You're in caring hands

Sales Contact Details (to be displayed on our website)

Company Name	
Sales Contact Name	
Address	
Phone Number	
Email	
Website	

Accounts Contact Details (for invoicing & payments)

Accounts Contact Name	
Address	
Phone Number	
Email	

Marketing Contact Details (the person responsible for booking seminar stands etc)

Marketing Contact Name	
Address	
Phone Number	
Email	

Your Products / Services

Type of Business	
Examples of products / services provided that would be relevant to residential care providers	
Offer / discount to be offered exclusively to HCA members	

I confirm that the above information is accurate and that I have authority to apply to Hampshire Care Association to become a Patron, on behalf of the above named company.

I also understand that if our application is accepted, we will be sent an invoice and a request for artwork and we will only become a Patron once both payment & artwork have been received.

Authorised Signature:

Print Name:

Date:

For and on behalf of: _____

Please return your completed form to:

Hampshire Care Association, 132 Bournemouth Road, Chandlers Ford, Hampshire, SO53 3AL

Or scan and email it to: events@hampshirecare.org