



SPONSORSHIP REQUEST FORM

Name:

Organisation:

Contact phone: email:

Date of Application: Date of Sponsorship:

Sponsorship Request:

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Sponsorship Justification:

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Benefit for CPR:

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Please send to: Sponsorship Request
CPR Coffee Co Ltd
18 – 20 Wynen Street
BLLENHEIM 7201

sales@cprcoffee.co.nz
Fax: 03 579 5041

Please attach additional supporting documentation as applicable.