



THE SPORTS COMMISSION ASSOCIATES

The St. Louis Sports Commission Associates is the Sports Commission's young professionals group. Created in 2007, the Associates help the Sports Commission fulfill its mission to make the St. Louis region a better place to live, visit, work and play through sports. Associates have the opportunity to volunteer for Sports Commission events, participate in the organization's activities, and attend business and social meetings hosted by the group.

Associates membership is open to anyone wishing to become involved in the Sports Commission's efforts. To help fund the group's activities and to demonstrate a commitment to the Associates, members are asked to pay annual dues of \$50. The components of Associates membership include:

- A direct link to rewarding volunteer opportunities and experiences that make a positive impact on the region through sports.
- Invitations to sports-themed business meetings and social gatherings held exclusively for members of the Associates.
- The opportunity to network with other St. Louis young professionals.
- Access to purchase seats for selected Sports Commission events ahead of the general public.

The Associates group is governed by its own board, which establishes the group's priorities and defines its involvement in Sports Commission events and projects. Associates members who become engaged in the group's activities will receive future consideration to occupy seats on the board.

To join the Sports Commission Associates, please complete the following information and return this form to the fax number, e-mail address or mailing address noted below. An electronic form is also online at stlsports.org/associates. Thank you for your support!

CONTACT INFORMATION

Name: _____ Title: _____
 Company: _____
 Street Address: _____
 City: _____ State: _____ Zip: _____
 Phone: _____ E-mail: _____

PAYMENT INFORMATION

For annual dues of \$50

Check enclosed (payable to the St. Louis Sports Commission)

Credit Card: MasterCard (preferred card of the Sports Commission) Visa American Express

Credit Card Number: _____ Expiration Date: _____

Card Security Code (Last 3 digits on back of card. 4 digit code on front of card for American Express.) _____

Name on Card: _____

Card Billing Address (including zip code): _____

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Please return by fax (314-621-1391), e-mail (tryan@stlsports.org) or mail to:
 St. Louis Sports Commission • Attn: Tim Ryan • 308 N. 21st Street, Suite 500 • St. Louis, MO 63103
 For more information, call 314-345-5101 or visit stlsports.org/associates.