



Community Partnership Program Form

Please fill out form and return to The City of Marina Recreation and Cultural Services Department

Name of Business / Organization _____

Contact Name _____

Phone # _____

Email Contact _____

I will be joining you as a partner this year:



Partner Levels:

“Justice League” \$300.00

“Fantastic 4” \$600.00

“X Men” \$1000.00

“Avenger” \$3000.00

To enhance our “Marina At Play” Program we would like to provide you with an Electronic copy of our Monthly Calendar and Spectator Newsletters

Yes - Please do!

No Thank you

Name: _____ Email: _____

Please enclose your check payable to: **City of Marina**

Mail to: The City of Marina—Recreation & Cultural Services Department— 211 Hillcrest Avenue Marina, CA 93933

Phone: (831)884-1288

Fax: (831) 384-9148

Email: mmock@cityofmarina.org