

## SPONSORSHIP APPLICATION FORM – 2025/2026

## **Annual Application Form**

Organisation:			
Principle Contact:	Title:		
Address:			
Postal Address:			
Telephone:	Email:		
Where do you want th	ne invoices emailed	l to:	
Website:	ABN:		
Fees:			
PLATINUM	GOLD	SILVER	BRONZE
\$5,900	\$3,000	\$2,500	\$1,500
Please refer to the CCASA we	ebsite for sponsorship p	package inclusions	
	Pa	yment Details	
Organisation:			
Contact Name:	Telephone:		
Payment Made By:	EFT	Paid to BSB: 015-225 Account	No: 417712767
	Cheque	Enclosed	
Account Name:	Cemeteries and Crematoria Association of South Australia		
Please return to: info@ce	meteriessa.com.au		
or by mail:			
CCASA Sponsorship Accou		th Australia, PO Box 294, Enfield P	laza SA 5085
Signed:			

## **Cemeteries and Crematoria Association of South Australia**

www.cemeteriessa.com.au

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Postal Address: PO Box 294, Enfield Plaza SA 5085

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