

The Chamber of Commerce acknowledges that it participates in the America's Schools Program and that it gives permission for its name to be listed as a participating entity in the program. The purpose of this participation, as relates to ASP and AccessOne Consumer Health, Inc. is so that the Chamber of Commerce can receive proceeds from the sale of the ASP National Benefit Card and the ASP Lifestyle Card. Proceeds paid to or on behalf of the entity will be equal to 25% of the cost of the National Benefit Card or the Lifestyle Card.

Chamber of Commerce name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: \_\_\_\_\_

Website: \_\_\_\_\_

Tax ID#: \_\_\_\_\_

Contact person: \_\_\_\_\_

Email: \_\_\_\_\_

Phone #: \_\_\_\_\_

\_\_\_\_\_  
Authorized signature on behalf of the Chamber of Commerce

\_\_\_\_\_  
Title

\_\_\_\_\_  
Name

\_\_\_\_\_  
Date

America's Schools Program  
P.O. Box 236  
Atwood, CA 92601

\_\_\_\_\_  
America's School Program Representative

\_\_\_\_\_  
ASP Rep Contact information