

# 2010 TEAM SPONSOR FORM

## COMPANY INFORMATION

COMPANY NAME: \_\_\_\_\_

CONTACT NAME: \_\_\_\_\_

STREET: \_\_\_\_\_

CITY: \_\_\_\_\_

STATE: \_\_\_\_\_

ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

We would like to sponsor: \_\_\_\_\_ Team(s) @ \$150 per team. Total enclosed \$ \_\_\_\_\_

Checks should be payable to: HS Soccer

### PLEASE CHECK ONE!

- We are first time sponsors. We have enclosed a camera ready logo  
(Please note: if logo is NOT camera ready an additional artwork charge may apply)
- We sponsored a team(s) last season but are submitting a NEW logo
- We sponsored a team(s) last season. Our logo will remain the same

Please list the child(ren) of your employees that you would like to include on you're your sponsored team(s).

Player Name: \_\_\_\_\_ Age group: \_\_\_\_\_  
Player Name: \_\_\_\_\_ Age group: \_\_\_\_\_  
Player Name: \_\_\_\_\_ Age group: \_\_\_\_\_

### PLEASE MAIL THIS FORM, ALONG WITH PAYMENT AND LOGO (IF REQUIRED) TO:

Travis Herber, Team Apparel, 1110 N. Military Ave, Green Bay, 54303, 920-499-4862 or 920-217-2812

*Please do not make checks out to Team Apparel. CHECKS SHOULD BE PAYABLE TO: HS SOCCER*

**THANK YOU FOR YOUR SUPPORT OF OUR PROGRAM**

## ASSOCIATION USE ONLY

Date Rcvd: \_\_\_\_\_

Check #: \_\_\_\_\_

Logo: \_\_\_\_\_