

# TEAM SPONSOR FORM

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

Sponsor: \_\_\_\_\_

Name on plaque and sign: \_\_\_\_\_

Mailing address: (NO PO BOX) \_\_\_\_\_

Phone number: \_\_\_\_\_

Phone number on sign: Y or N

Team Name: \_\_\_\_\_

Team Division: MM FR SO JR SR

Head Coach: \_\_\_\_\_

Amount paid: \$ \_\_\_\_\_

( Make all checks payable to EMCSA )

Receipt and Tax I.D. Certificate will be mailed to sponsors address

**FULL TEAM SPONSOR**

**\$350.00**

**FIELD SIGN / 8X10 PLAQUE**

**HALF TEAM SPONSOR**

**\$175.00**

**FIELD SIGN / 5X7 PLAQUE**

( FOR BOARD USE ONLY )



TEAM PLAQUE:      5X7      8X10      NO PLAQUE  
AMOUNT REIMBURSED \$ \_\_\_\_\_



I CERTIFY THAT ALL INFORMATION IS ACCURATELY SPELLED, I ALSO UNDERSTAND THAT ALL SPONSOR INFORMATION WILL APPEAR ON PLAQUES AND FIELD SIGNS EXACTLY AS IT IS WRITTEN ON THIS FORM

\_\_\_\_\_  
HEAD COACH SIGNATURE

\_\_\_\_\_  
BOARD MEMBER SIGNATURE