



TIMBERGROVE SPORTS ASSOCIATION

2018 SOCCER SPONSORSHIP FORM

YOUR NAME: _____

YOUR ADDRESS: _____

CITY, STATE & ZIP: _____

YOUR PHONE NUMBER: _____

YOUR EMAIL ADDRESS: _____

COMPANY NAME: _____

COMPANY ADDRESS: _____

CITY, STATE, & ZIP: _____

COMPANY PHONE: _____

Name of Coach or Player whose team you want to sponsor (if known): _____

SPONSORSHIPS AVAILABLE:

Team Sponsor @ \$200 _____ (number of teams sponsored)

Total Sponsor Fee \$ _____

Sponsorship questions contact TimbergroveSponsors@gmail.com

PRINT EXACTLY HOW SPONSOR NAME IS TO APPEAR ON BACK OF JERSEYS:

No more than two lines please. The more words the smaller the text will be.

PRINTING WILL NOT BE AUTHORIZED UNTIL ALL FEES ARE PAID.

PLEASE EMAIL THIS COMPLETED FORM TO TimbergroveSponsors@gmail.com

FOR PAYMENT PLEASE BRING A CHECK TO TRYOUTS OR ATTACH CHECK TO THIS FORM AND MAIL TO:

Timbergrove Sports Association
P.O. Box 926397
Houston, Texas 77292-6397

THANKS FOR YOUR SUPPORT!!