

Dear Business Owner/Manager:

On behalf of the Board of Directors of North Springs Little League, **HOME OF THE 10 TIME STATE CHAMPIONS 2005, 2006, 2008, 2009, 2012, 2013, 2015, 2016 & 2017 and 4 TIME SOUTHEAST REGIONAL CHAMPIONS 2012, 2013 & 2017**, and **2017 LITTLE LEAGUE WORLD SERIES NATIONAL CHAMPIONS**, we would like to introduce you to an exciting opportunity for you to support a youth program in our community, while advertising your business at the same time.

More than 400 children participate in our baseball programs. As a **Team Sponsor**, your team is provided uniform jerseys with your company name on them. Your web page and link is displayed on our team sponsor league page on the North Springs website. At the end of the season, you will receive a recognition plaque with the team in uniform to display in your office or place of business. You can also support our program by purchasing a **Backstop Banner** or **Score Board Sponsorship** to advertise your business. These are displayed at the playing fields throughout the season.

<input type="checkbox"/> <b>Team Sponsorship</b> \$350/season (42)	<input type="checkbox"/> <b>Backstop Banner</b> \$300/season (24)
<input type="checkbox"/> <b>Dual Sponsorship</b> \$600/season	<input type="checkbox"/> <b>Score Board Sponsorship</b> \$2000/year (4)

COMPANY NAME \_\_\_\_\_ DATE \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY / STATE \_\_\_\_\_ ZIP \_\_\_\_\_

CONTACT PERSON \_\_\_\_\_ PHONE \_\_\_\_\_

Web Page \_\_\_\_\_ E-MAIL \_\_\_\_\_

NAME TO BE PRINTED ON SHIRT \_\_\_\_\_

*(ATTACH A BUSINESS CARD IF APPLICABLE)*

DIVISION REQUESTED \_\_\_\_\_ Manager Requested \_\_\_\_\_

Players Name \_\_\_\_\_ Players Age \_\_\_\_\_

AMOUNT ENCLOSED \_\_\_\_\_ CHECK # \_\_\_\_\_

**Make checks payable to "North Springs Baseball" and mail to:  
Jason Rosoff, c/o North Springs Baseball, 1330 W. Newport Center Drive, Deerfield Beach, FL 33442**

**RECEIPT OF SPONSORSHIP**

North Springs Baseball      Federal Employer ID #: 26-1689123

Sponsorship Received From (Company Name): \_\_\_\_\_

Amount Received: \_\_\_\_\_ Check #: \_\_\_\_\_

Date: \_\_\_\_\_ Received By: \_\_\_\_\_