

TO BE RETURNED TO LYHA

PLEASE FILL OUT THE ENTIRE FORM SO THAT WE CAN PROPERLY PROCESS YOUR SPONSORSHIP PROPERLY

Choose Amount within the advertised ranges:

(fixed amounts are noted and cannot vary)

TYPE OF SPONSORSHIP: (CHOOSE ONE)

<input type="checkbox"/>	TOURNAMENT TITLE SPONSOR	Donation Amount: \$ <u>(\$2,500-5,000)</u> Enter \$ _____	Tournament Chosen: Halloween (10U/12U/14U) _____ (OR) Valentine's Day (8U/Mites) _____
<input type="checkbox"/>	LEAD GENERAL SPONSOR	Donation Amount: \$ <u>(\$1,000-2,000)</u> Enter \$ _____	
<input type="checkbox"/>	WEBSITE AD-ONLY SPONSOR	Donation Amount: \$ <u>150.00</u> (fixed)	
<input type="checkbox"/>	WEBSITE HOST SPONSOR	Donation Amount: \$ <u>2,000</u> (fixed)	
<input type="checkbox"/>	JERSEY SPONSOR	Donation Amount: \$ <u>20,000</u> (fixed, covers entire registered players)	
<input type="checkbox"/>	STANLEY CUP SPONSORSHIP	Donation Amount: <u>(\$12,500 1yr or \$20,000 2yrs)</u> Enter \$ _____	
Businesses Name: _____ Department: _____ Address: _____ City, State Zip: _____		PLEASE SUBMIT ALL PAPERWORK FORMS AND LOGOS (in JPEG and PNG formats) electronically to: Angie Dalton, Fundraising/Sponsorships and Tournaments Chair, angeliquejohnston1979@yahoo.com 315-420-1973 text or call with any questions	
Main Point of Contact - Name (First and Last) _____ Title or Position: _____ Office Phone #: _____ Mobile or Alternative Phone #: _____ Work Email: _____		Mail all checks to: LYHA PO BOX 622 Baldwinsville, NY 13027	

DATE: _____

SIGNATURE OF REQUESTOR/APPROVER: _____