

Girard Youth Soccer League Sponsorship Form

2017

Please print clearly and fill out entire form.

Sponsor Name _____

Contact Name _____

Address _____

City _____ State _____ Zip _____

Phone Number _____

Alternate Phone Number _____

Email _____

Would you like to receive our newsletters? Yes No

Sponsor Level:

___ 1 Team \$200

Child associated with team _____

Coach _____

Color Choice #1 _____

Color Choice #2 _____

___ 2 Teams \$400

Child associated with team _____

Coach _____

Color Choice #1 _____

Color Choice #2 _____

___ 3 Teams \$600

Child associated with team _____

Coach _____

Color Choice #1 _____

Color Choice #2 _____

If you would like to design your own wording for the front of the jerseys please email it to girardyouthsoccerleague.com no later than June 1st.

All sponsor forms must be in by June 5th. Please mail to PO Box 36 Girard, Ohio 44420

GYSL is now a 501(c)3 corporation so all of your donations are tax deductible.

If you have any questions please email girardyouthsoccerleague@yahoo.com

DO NOT WRITE BELOW – GYSL USE ONLY

Fee Paid \$ _____ Cash Check # _____ Rec'd. By _____ Date _____

President Tonya Carpenter
PO Box 36 Girard, Ohio 44420

www.girardyouthsoccer.com girardyouthsoccerleague@yahoo.com