



Sponsorship Form

Sponsor Name: _____

Contact Name: _____

Mailing Address: _____

Phone: _____ Email: _____

Basketball

- | | |
|---|---|
| <input type="checkbox"/> Player Registration \$65 | <input type="checkbox"/> Team \$200 |
| <input type="checkbox"/> Equipment \$100 | <input type="checkbox"/> Youth Officials \$100 |
| | <input type="checkbox"/> Specify Other \$ _____ |

Cheer/Football

- | | |
|---|---|
| <input type="checkbox"/> Football Player Registration \$195 | <input type="checkbox"/> Cheerleader Registration \$295 |
| <input type="checkbox"/> Football Equipment \$100 | <input type="checkbox"/> Cheer Gear \$100 |
| | <input type="checkbox"/> Specify Other \$ _____ |

Ponytail Softball

- | | |
|---|---|
| <input type="checkbox"/> Player Registration \$75 | <input type="checkbox"/> Team \$325 |
| <input type="checkbox"/> Banner Renewal \$100 | <input type="checkbox"/> Small Banner \$175 |
| <input type="checkbox"/> Large Banner \$350 | <input type="checkbox"/> Youth Officials \$100 |
| <input type="checkbox"/> Equipment \$100 | <input type="checkbox"/> Specify Other \$ _____ |

Summer Softball

- | | |
|--|---|
| <input type="checkbox"/> Player Registration \$350 | <input type="checkbox"/> Team \$1000 |
| <input type="checkbox"/> Equipment \$100 | <input type="checkbox"/> Specify Other \$ _____ |

Volleyball

- | | |
|---|---|
| <input type="checkbox"/> Trophies \$450 | <input type="checkbox"/> Specify Other \$ _____ |
|---|---|

Wrestling

- | | |
|--|---|
| <input type="checkbox"/> Wrestler Registration \$160 | <input type="checkbox"/> Youth Officials \$100 |
| <input type="checkbox"/> Equipment \$100 | <input type="checkbox"/> Specify Other \$ _____ |

Copello Park

- | | |
|--|---|
| <input type="checkbox"/> Utilities: Water/Power/Sewer \$ _____ | <input type="checkbox"/> Lights \$300 |
| <input type="checkbox"/> Equipment \$500 | <input type="checkbox"/> Fields \$500 |
| <input type="checkbox"/> Maintenance \$500 | <input type="checkbox"/> Buildings \$500 |
| <input type="checkbox"/> Gymnasium Fund \$ _____ | <input type="checkbox"/> Specify Other \$ _____ |

Fundraisers

- | | |
|---|---|
| <input type="checkbox"/> Crab Feed \$500 | <input type="checkbox"/> Parking \$500 |
| <input type="checkbox"/> Money Giveaway \$500 | <input type="checkbox"/> Specify Other \$ _____ |

Notes: _____

Keep this portion for your records

We thank you for your generous tax-deductible contribution. Our Tax ID# is 23-7286829.

Make check payable to AMA Booster's Club: AMA Booster's Club, PO Box 664, Altaville, CA 95221

Amount Paid:	Check No./Cash Payment:	AMA Initials:	Date:
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