2024 Sponsorship/Partner Selection Form

League Participant Submitting Form:	Team:
Type of Sponsorship: (League = League donation - No team credit, Team = Applies to Team Sponsorship)	
League:	
Team:	Team name:
Sponsorship Type: (i.e. 1B, 2B, 3B, HR, Grand Slam, Snack Bar, or Scoreboard)	Player:
	Donation Amount: \$
Sponsors Name:	_
Address:	_
City/State:	_
Phone:	
Contact:	_
Website Recognition: Plaque or Trophy: Video Recognition: Banner Recognition: Artwork for Banner: Additional Information:	What Size:
League Approval-Sponsorship Director Date L	eague Approval-President Date