

Sumter County Recreation & Parks YOUTH BASKETBALL SPONSOR – 2013



Please return this invoice with your sponsor fee

<u>Company</u>	<u>Contact Person</u>
Name: _____	Name: _____
Address: _____	Phone #: (____) _____ - _____
_____	Fax #: (____) _____ - _____
Email Address: _____	

Team Sponsorship	2013 Season	\$150.00
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Thank you for your support of the Sumter County Youth Basketball Program.
Your involvement is vital to the success of our program!

INFORMATION AND OPTIONS

- ⇒ Returning sponsors have first choice of leagues if payment is received by November 11, 2013.
- ⇒ New sponsors will be assigned to their child's league after November 11, provided space is available in that league. The date of check receipt determines assignment order.
- ⇒ If you **DO NOT** have a child in the program and/or **DO NOT** have a league or age preference, please check here: _____. Thank you for allowing us to assign your sponsorship to a league where sponsors are most needed.

⇒ I wish to support the following age group: (circle one)

- | | | |
|--------------------------|--------------------------|--------------------------|
| 5 – 6 Year Olds | 7 – 8 Year Olds | 9 – 10 Year Olds |
| 11 – 12 Year Olds | 13 – 14 Year Olds | 15 - 17 Year Olds |

If you have children in the program, please list names, and ages.

Name _____ age _____ (circle one) Boy / Girl
 Name _____ age _____ (circle one) Boy / Girl

- ⇒ Sponsors logo will be placed on the back of the jersey, at the shoulders
- ⇒ Sponsors will receive a team jersey and a team photograph.
- ⇒ Make checks payable to: **Sumter County Recreation & Park or SCRP**
- ⇒ Mail to: **ATTN: Youth Basketball Sponsor,**
155 Haynsworth St., Sumter, S.C. 29150
- ⇒ If you have any questions, please call: **Christopher Williams @ (803) 436-2248**
Or email cwilliams@sumtercountysc.org

OFFICIAL USE ONLY				
AMOUNT PD \$ _____	CA / CK # _____	DATE ____ / ____ / ____	BY: _____	RECEIPT # _____