

2015-2016 Corporate Sponsorship Application

I have fought the good fight, I have finished the race and I have remained faithful.

2 Timothy 4:7

The Goal of the GICAA

The goal of the GICAA, LLC is to create an environment where high school and middle school students can compete at their level yet still be encouraged to grow in their faith. The GICAA, LLC understands that its member schools, although they will be competing against each other, are all part of the same team (God's team). The GICAA, LLC desires to unite Christ-Centered schools, Independent Schools and Learning Centers who wish to impact and influence their students through athletics. The GICAA, LLC member schools will work together to create a competitive athletic environment that honors God at all levels. The GICAA, LLC and its member schools will strive to set a Godly example of excellence for other leagues to follow.

GICAA Core Faith Statement

The primary goal of school athletics should be to teach life lessons and life skills that will equip and prepare our young men and women for the world beyond school athletics. Also our desire is to provide the very best opportunity for those who wish to play at the next level. Winning is important, but it is not the most important thing. Bringing honor and glory to God in how we play is more important than winning.

"It is possible to win a game... yet lose our ability to shine light into a dark world."

Every school, athletic director, coach, team, and athlete should strive to do their very best because God is honored when we give our best to Him. Athletic Directors, coaches, teams, and athletes should understand that, because of their position, they carry a great deal of influence and should act accordingly. Coaches hold an enormous amount of influence over their athletes. Therefore, member schools should choose their coaches carefully and prayerfully.

Athletic competition can be and should be conducted in a way that brings honor and glory to God and draws people to Him.

If athletic competition is done properly, win or lose, it will promote mutual respect and encouragement from schools, teams, and players. If athletic competition divides us and produces discord and strife, then it ceases to be God-honoring.

Schools should have the opportunity to compete in a safe and Godly environment without unnecessary distractions. Although league parity is almost impossible, teams should have the opportunity to compete on a level playing field.



Georgia Independent Christian Athletic Association 2015-2016 Corporate Sponsorship Application

Name of Company:		
Mailing Address:		
City:	State:	Zip:
Contact Name & Title:		
Contact's Email:		
Contact's Phone:	Fa	x:
Web Address:		
Please give a short descri	ption of your company:	



Did you receive your sponsorship application from a GICAA school? Yes___No___ If yes, please provide school name:

Sponsor Levels: (please check)

Diamond Package	\$ 2,500.00
Platinum Sponsorship	\$ 1,500.00
Gold Sponsorship	\$ 1,000.00
Silver Sponsorship	\$ 500.00
Corporate Sponsorships	**
State Venue Sponsor	**
State Championship Referee Sponsor	**
State Championship Program Sponsor	**
State Championship Hospitality Sponsor	**
**Prices will vary depending on event	
Total Duce	ć
Total Due:	<u>ې</u>

If paying by check, please make payable to GICAA, 407 East Maple Street, Suite 112 Cumming, GA 30040.

***Please email your jpeg. Logo to gicaasports@gmail.com



Georgia Independent Christian Athletic Association One Time Credit Card Payment Authorization Form

Please fill out and sign this form to authorize GICAA to make a one time debit/charge to your credit card on the account listed below.

In signing this form, you have given GICAA permission to charge the account you indicated for the amount you agree to above on or after the date signed. This is a one time charge only and will not provide authorization to add additional debits/charges to your account.

Please complete the form below:

authorize GICAA to charge my credit card for the
Date
Phone #
Fax #

Contact's Name and Email



Account Type: Visa MasterCard			
Cardholder Name:			
Account Number:			
Expiration:	_		
CVV2-3 digit number on back of Visa/Mastercard)			

Authorized Signature: _____ Date: _____

I authorize the above named business to charge the credit card indicated in this authorization form according to the terms outlined above. This payment authorization is for the goods/services described above, for the amount indicated above only and is valid for a one time use only. I certify that I am an authorized user of this credit card account and that I will not dispute the payment with my credit card company as long as the transaction corresponds to the terms indicated in this form.

If you have any questions, please feel free to contact us anytime:

Gene Harper, Executive Director 407 East Maple Street, Suite 112 Cumming, GA 30040 Office 678-679-7123