



SPRING / FALL 2018

501c3 Non-Profit Organization
 P.O. Box 212
 West Chester, OH 45071

TEAM SPONSOR CONTRACT
 teamsponsor@lakotasports.org

Sponsor Information (please print clearly)	Sponsor Fee \$200.00 (per team) Sponsorship includes the following opportunities: *Business name listing on LSO's Website, *Logo on a team's jersey (shirts)
Business Name:	PLEASE ATTACH BUSINESS CARD and NAME AS YOU WOULD LIKE THIS LISTED
Business Address:	
City: Zip Code:	
Contact Name:	
Position:	
Work Phone: Cell Phone:	
Home Phone:	
Email address:	

I would like to sponsor the following LSO Recreational Team(s):

Team	Sport <small>Please circle specific sport</small>	Child's Name <small>if associated with Sponsor</small>	Child's Birth Date <small>mm/dd/yy</small>
A	Spring Soccer *Spring Baseball Spring Softball		
	Fall Soccer Fall Baseball Fall Softball **Fall Flag Football		
B	Spring Soccer *Spring Baseball Spring Softball		
	Fall Soccer Fall Baseball Fall Softball **Fall Flag Football		
C	Spring Soccer *Spring Baseball Spring Softball		
	Fall Soccer Fall Baseball Fall Softball **Fall Flag Football		
D	Spring Soccer *Spring Baseball Spring Softball		
	Fall Soccer Fall Baseball Fall Softball **Fall Flag Football		

ADDITIONAL SPONSORSHIP OPPORTUNITIES FOR TEAM SPONSORS

_____ **SPRING RAFFLE COUPON SPONSOR** - \$250 to place a coupon on the back of the LSO annual Raffle Ticket.

_____ **OTHER** – There are a number of other sponsorship opportunities. Please email: sponsor@lakotasports.org

I will be sponsoring _____ teams(s) during the 2018 season(s). I have also included logo information and shirt/letter color choices. I have enclosed payment of _____.

 Signature of Sponsor

 Date of Contract

PLEASE SEND AN INVOICE FOR SPONSORSHIP PAYMENT.

PLEASE DO NOT SEND A TEAM PHOTO SPONSOR PLAQUE.

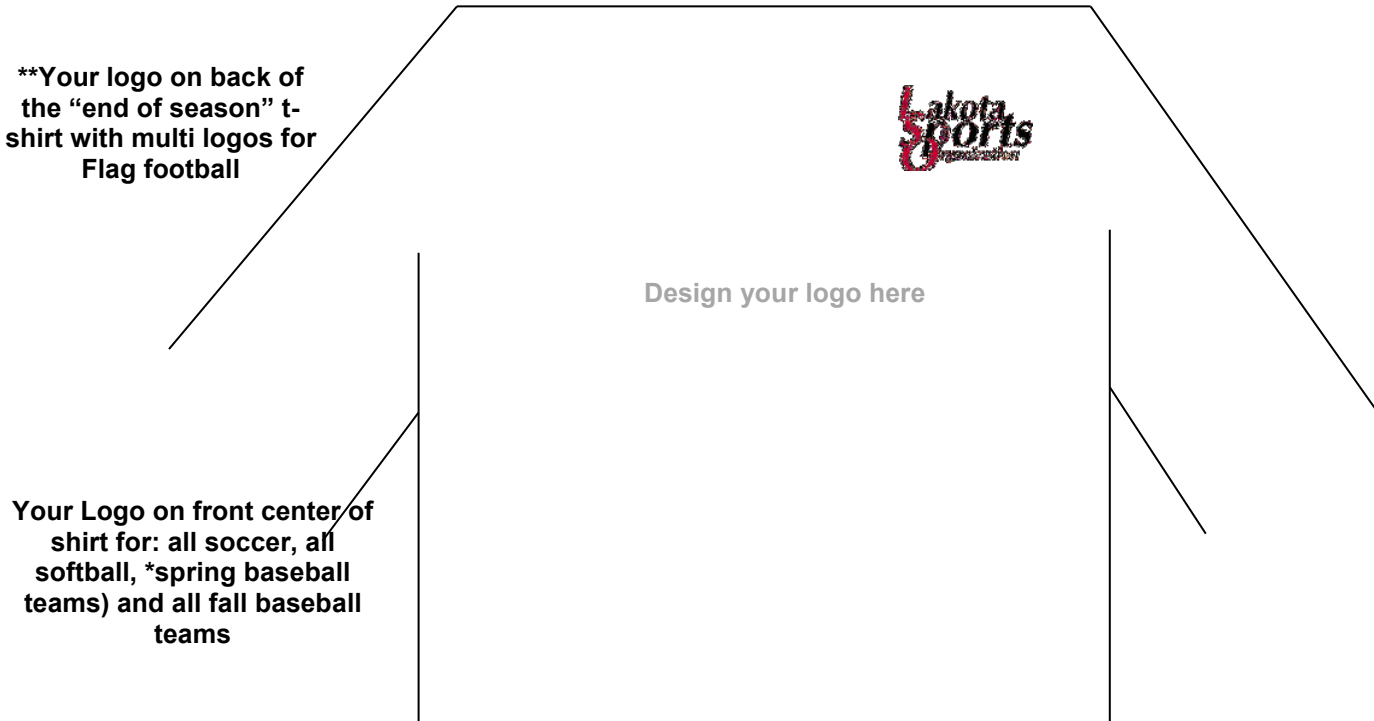
LSO OFFICE USE ONLY

Date: _____ Payment \$: _____ Payment #: _____ Logo: _____ Invoice: _____ Plaque: _____

TEAM SPONSOR CONTRACT - 2018

Directions:

1. Email logo to: teamsponsor@lakotasports.org
2. Choose color preferences, please list 3 colors. Color preferences are given on a first come, first serve basis.



GUARANTEED COLOR CHOICE DEADLINE DATES - Please write NONE if you have no preference on color.

COLOR CHOICES FOR *SPRING BASEBALL AND **FALL FLAG FOOTBALL WILL NOT BE ACCEPTED DUE TO LEAGUE UNIFORM POLICIES.

- January 15th Spring Soccer
- February 15th Spring Softball/Baseball/Volleyball
- June 15th Fall Soccer
- July 15th Fall Baseball/Softball/Volleyball

Team	1 st Color Preference		2 nd Color Preference		3 rd Color Preference	
	Shirt	Letters	Shirt	Letters	Shirt	Letters
A						
B						
C						
D						

<p>Please send this completed, signed sponsor form including logo information and <u>payment</u> to:</p> <p>Lakota Sports Organization ATTN: Sponsor Coordinator P. O. Box 212 West Chester, OH 45071</p>	<ul style="list-style-type: none"> • LSO will match your child to your sponsored team unless the team already has a sponsor. You will be contacted if there is a problem with team placement. Please send in sport registration form separately. • Uniform color choices may vary depending on availability and sport. Colors requested will be assigned on a first come, first serve basis. Color choices cannot be guaranteed. See above for additional information. • LSO Recreation uniforms will have the LSO logo on the front, upper left corner. Sponsored teams will have the sponsor's logo on a shirt as described above.
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