



Sponsor's Name:	
Contact Person:	
Mailing Address:	
Email Address:	
Telephone Number:	
Name you would like on the team shirts:	
Preferred color of shirt: (not guaranteed)	
Type of Sponsorship: (Check One)	<div>_____ League Sponsor \$250</div> <div>_____ Organization Sponsor \$500</div> <div>_____ Benefactor \$1000</div>
If you would like to make a contribution to our HSSL without formal sponsorship or in addition to sponsorship, please check here and indicate the amount of your contribution.	<div>Contribution Amount: \$_____</div>
Total Amount Remitted:	\$_____ (Please include 2 business cards)

Please complete this form and **mail it with your business card** and check by March 1st.

Checks should be made payable to: **Hanover Senior Softball League**
 PO Box 3361
 Mechanicsville, VA. 23116-3361

www.HanoverSeniorSoftball.org