



Joliet Buccaneers Minor League Football PLAYER SPONSORSHIP APPLICATION



(please print clearly)

NOTE: We appreciate the financial support from individual sponsors and small businesses.

Application Date: New Sponsor: Repeat Sponsor:
year mo. day

Company/Sponsor Name: _____

_____ street address _____ mailing address (if different)

_____ city _____ postal code

_____ contact person _____ telephone # _____ fax # _____ e-mail address

Name to be advertised and printed on game day program: _____

Logo artwork or sample enclosed (if logo also desired to be advertised and placed in program)

Please complete the following to accommodate your request to sponsor a specific individual. If you are interested in sponsoring the team, your sponsorship will automatically be applied to the organization.

_____ Player's first & last name _____ Relationship to sponsor

Please indicate if you wish to receive website link

For website link, please indicate your website address: _____

Please remember to enclose your check when returning this sponsorship application. After checking to ensure that you have fully completed this form, mail it with your check to:

Joliet Buccaneers
Minor League Football
Organization
Attention: Player Sponsorship
P.O. Box 2536
Joliet, IL 60435

I understand that my sponsorship is for Joliet Buccaneers Minor League Football Organization and that there is a guarantee it will be directed to the above mentioned player or if directed to the organization.

Signature: _____ Date: _____