



# Team Sponsorship

**Thank you for supporting Longview Soccer Club.** Your sponsorship provides the youth of Longview an opportunity to learn and enjoy recreational soccer. "Sponsoring Businesses" should be a family/youth oriented establishment. Complete this form and submit with payment on or before the date stated below.

**Please do not mail checks or sponsor forms.**  
**Questions? ... Please email [longviewsc@gmail.com](mailto:longviewsc@gmail.com)**

**Sponsor Form & payment is due:**

Mid-Aug., 2017 at the Longview Soccer Club Coaches Meeting

## SPONSOR NAME

Enter the name that you want to appear on the team jerseys.  
Name is limited to 2 lines, 13 characters per line (including spaces).

Line 1: \_\_\_\_\_

Line 2: \_\_\_\_\_

## SPONSOR INFORMATION

**Address:** \_\_\_\_\_

**Business Phone:** \_\_\_\_\_

**Sponsor Contact Name:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_

Sponsors will have their business name on back of team jerseys (as listed above) **AND** will receive a team plaque.  
Head Coach will receive a free team jersey (with sponsor name on back).

## SOCCER TEAM INFORMATION

**Head Coach:** \_\_\_\_\_ **Coach Shirt Size:** \_\_\_\_\_

(**ONE** COACH SHIRT – FREE W/ Team Sponsor)

**Team Gender:**  Boys  Girls

\$150.00 Sponsorship for:  U6  U7  U8

\$200.00 Sponsorship for:  U9  U10

\$275.00 Sponsorship for:  U11  U12  U13  U14

Additional shirts are:  
\$20.00 for Jersey Shirt

If requesting additional shirts,  
please list sizes here:

## **MAKE CHECKS PAYABLE TO:**

Longview Soccer Club or LSC

## **FOR OFFICIAL USE ONLY**

Date Submitted / Paid: \_\_\_\_\_

Received By: \_\_\_\_\_

Amount Paid: \$ \_\_\_\_\_  Cash  Check, #: \_\_\_\_\_