

South County Youth Soccer Club 148 High St. Unit #1, Wakefield, RI 02879

148 High St. Unit #1, Wakefield, RI 02879 (401) 782-8200 scysc1@gmail.com www.scysc.org

2019/2020 FALL/SPRING RECREATIONAL PROGRAM SPONSORSHIP FORM

Business Name:
Contact Name:
Email:
Phone Number:
Mailing Address:
Desired Sponsorship Level: ☐ 1 team for \$250 (Fall '19 only)\$400 for Fall '19 and Spring, 2020 ☐ 2 teams for \$450 (Fall '19 only)\$800 for Fall '19 and Spring, 2020 ☐ 3 teams for \$600 (Fall '19 only)\$1000 for Fall '19 and Spring, 2020 ☐ 4 teams for \$700 (Fall '19 only)\$1200 for Fall '19 and Spring, 2020 Please indicate the business name exactly as you wish it to appear on the uniform:
If you would like to sponsor a particular age group, please indicate it below:
Let us know if you have a child who will play in the Fall '19 or Spring 2020 House/Recreational Program. We will place your child on your sponsored team.

Kindly return this form with a check payable to the South County Youth Soccer Club by May 15th.

Send us your logo electronically in .jpeg, .jpg or .gif format to scysc1@gmail.com by May 15th as well.

Thank you for your generous support!!