

Columbus Youth Soccer League
Sponsorship Form

Sponsor Name: _____

Sponsor Address: _____

Contact Name: _____

Contact Number: _____

Email Address: _____

Please check which sponsorship level you are paying for:

☐ **Team Sponsorship:**

Number of Teams to Sponsor: _____

Fee Per Team \$100.00 x \$ 100.00

Total Sponsor Fee: \$ -

Player or Team Sponsorship Preference:

We will need art work or logos to put on the jersey of the team you are sponsoring.
Please send your digital logo to Gary. We can also create a logo or use text.
Please email to **cysltx@gmail.com**

☐ **Corporate League Sponsorship:** \$ - (\$250.00 if selected)

Sponsors at this level will have their logo on the Sponsor Billboard at the soccer fields and your logo will be displayed on our website CYSTX.COM

ALL SPONSORS:

Please drop off your check only with this form to Liz at A Creative Touch Salon or mail to:
CYSL, PO Box 911, Columbus, TX 78934

Columbus Youth Soccer is a 501c3 Non-Profit Corporation. Please consult your tax professional for the deductibility of your sponsorship fee. Typically this can be considered Advertising, but we are not giving tax advice. Please make a copy of this form for your records.