

2023 ATHLETIC Sponsorship Program

Busines	ss/Sponsor Name:			
Phone	Contact Name:	Fma	il·	
Address		LITIC	City:	Zip:
	Ultimate Sponsor- \$	1,400/year (N eams through	o Deadline) out the year. W	Ve will work with you to
	Team Sponsor- \$350. Please circle the spor		ou would like	to sponsor.
	Winter Basketball	Spring Ba	seball	Spring Volleyball
	Fall Flaç	g Football	Fall Volley	ball
Change	or Perks	1000000	// (10)	
Please fil Na	ou like a sponsor shirt? I out the following section me of specific coach or ecific Branch (please ci	ions with any property of the contract of the	oreferences yo	ou may have:
				ge:
Na (Enclosed: \$ ame on Card: Card Number: Expiration: gnature:		orization Code	GCWC) Credit Card
		Please invoic	e my company	1
		ase mail your cky Street, Be	payments to llingh <mark>am,</mark> WA 9	98229
Font			y 11" wide spac tcomclubs.org	ce and can be mailed to

Please Note: Parents/guardians of B&GC members have agreed to hold BGCWC, its agents, employees, and officials, while acting within the scope of their duties, harmless from all causes of actions, demands, and claims.