



Carolina Beach Lacrosse Club

SPONSORSHIP FORM

Name (as you would like it to appear): _____

Address: _____

City: _____ State: _____ ZIP: _____

Phone (with area code): _____ Cell (with area code): _____

E-Mail: _____ Website: _____

Contact Person: _____ Phone: _____

Sponsor w/ New Sign year 1 (\$600) Sponsor w/ Existing Sign subsequent years (\$500)

(For your first year of sponsorship we will print you a sign. Signs will be reused, reducing costs for all, if the appearance is maintained)

SIGN SPONSOR: A 2' x 4' sign with your name and logo will be displayed for the a year at Mike Chappell Park Lacrosse Fields.

Other Sponsorships @ _____ # _____ " _____
_____ 7 _____ i _____
_____ u _____

Enclosed is my check per sponsorship, payable to Wilmington Lacrosse Club. Please, denote Carolina Beach Lacrosse Club in the memo.

I understand my sponsorship period runs one year from the date the sign is installed on the fence at Mike Chappel. Signs will be displayed for a year and Carolina Beach Lacrosse club will make their best attempt to temporarily removed in advance of extreme windy weather, however Carolina Beach Lacrosse Club is not responsible for any damaged signs.

Signature _____ Print

Name _____

Please retain a copy for your records. Your support of youth lacrosse here on the Island is greatly appreciated!

Call for Pick Up or Mail To:

Carolina Beach Lacrosse Club 1118 Carolina Beach Ave North Carolina Beach, NC 28428
email artwork for sign to: CarolinaBeachLacrosse@gmail.com

OFFICE USE:

Amount Paid: \$ _____

Name of CBLC Representative: _____

Date Installed: _____ *Pick Up or Questions? Email carolinabeachlacrosse@gmail.com*