

Upstate Trojans Basketball

SPONSORSHIP AGREEMENT

Company _____

—
Business Address

City, State, Zip _____, _____,

Phone (____) _____ - _____ Cell (____) _____ - _____

Contact Person: _____

Email: _____

Which Sponsor Package would you like??

Customer Initials _____

By hereby signing this document the undersigned agrees to enter into a sponsorship agreement with the Upstate Trojans. Payment is to be made in full at the time of signing this agreement.

Customer Signature Date

Upstate Trojans Rep Signature Date