



Everyone Plays – Balanced Teams – Open Registration – Positive Coaching – Good Sportsmanship – Player Development

Team Sponsorship Form

Fall Spring

Boys Girls Co-ed

U-19 U-16 U-14 U-12 U-10 U-8 U-6 U-5

Team #: _____

Coach Name: _____

Team Representative: _____

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Sponsor Name: _____

Contact Name: _____

Address: _____ City: _____

State: _____ Zip: _____

I would like to sponsor the following team(s):

Team Name: _____

Team Name: _____

Sponsorship Level	<input type="checkbox"/> 1 Team	<input type="checkbox"/> 2 Teams	<input type="checkbox"/> 3 Teams	<input type="checkbox"/> 4 Teams
U5 – U6	\$100	\$200	\$300	\$400
U8 thru U19	\$125	\$250	\$350	\$450

You can give your check to the team representative or mail to the address listed below.

Please make checks payable to:

AYSO Region 187
Attn: Treasurer
P.O. Box 8416
Moreno Valley, CA 92552-8416

TAX ID: 95-6205398

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On behalf of the children of AYSO Region 187, we Thank You for your support!

REGIONAL TREASURER USE ONLY		
Date Form Rec'd:	Check #:	Amount: \$
Tax Receipt Mailed: Yes / No	Date Mailed:	
Notes:		