

St. Joe's Athletic Sponsorship Banner Application

*** Limited space available at each venue, offered on a first-come, first served basis***

Sponsor Name: _____

Sponsorship Level:

- | | |
|---|---|
| <input type="checkbox"/> \$450 Level (1 venue) | <input type="checkbox"/> \$850 Level (2 venues) |
| <input type="checkbox"/> \$350 Renewal (1 venue) | <input type="checkbox"/> \$650 Renewal (2 venues) |
| <input type="checkbox"/> \$1,200 Level (3 venues) | <input type="checkbox"/> \$1,500 Level (4 venues) |
| <input type="checkbox"/> \$950 Renewal (3 venues) | <input type="checkbox"/> \$1,200 Renewal (4 venues) |

Please make check payable to SJCS and mail to 100 St. Joseph's Drive, Greenville, SC 29607

SJCS Athletic Field/Venues:

- | | | |
|--|--|---|
| <input type="checkbox"/> Football/Soccer/Lax Field | <input type="checkbox"/> Tennis Courts | <input type="checkbox"/> Softball Field |
| <input type="checkbox"/> Baseball Field | | |
| <input type="checkbox"/> Gymnasium | | |

This sponsorship will benefit the following athletic team(s):

Signage options :

- Full color business logo* only

OR

- Personal message and logo* (**ALL** messages are in blue font with a white background)

PLEASE CIRCLE ONE CHOICE BELOW AND WRITE TEXT BELOW

<small>OPTIONAL ST. JOE'S LOGO</small>  YOUR LOGO HERE <small>4" LETTERS 4" LETTERS 4" LETTERS 4" LETTERS 4" LETTERS 4" LETTERS 4" LETTERS 4" LETTERS 4" LETTERS</small>	<small>YOUR CHILDS NUMBER HERE (OPTIONAL)</small> WE SUPPORT NUMBER 11 <small>(27) CHARACTERS PER LINE</small>	YOUR LOGO HERE (846) 888-8888 <small>4" LETTER WEB SITE</small>	YOUR LOGO HERE <small>4" LETTERS 4" LETTERS 4" LETTERS 4" LETTERS 4" LETTERS 4" LETTERS 4" LETTERS 4" LETTERS 4" LETTERS</small>
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Text:

***Please provide a high resolution vector file**

For more information, please contact:

Joel Poinette

Athletic Booster Club

joelpoinette@allstate.com

How would you like your name(s) to appear on our official records?

Sponsor Name: _____

Telephone: _____ Email: _____

Address: _____

City: _____ State: _____ Zip: _____

Solicitor's Name: _____

SJCS Sport: _____

Telephone: _____ Email: _____

Address: _____

City: _____ State: _____ Zip: _____

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