

Rcvd \_\_\_\_\_ Check# \_\_\_\_\_ Amount \_\_\_\_\_ Flight \_\_\_\_\_ Night \_\_\_\_\_



# 2018 Soccer Team Sponsorship

Crawford County Youth Soccer Association

P.O. Box 641, Meadville, PA 16335

C.C.Y.S.A. is about to embark on its 36<sup>th</sup> year of soccer! The financial support given by civic-minded businesses and individuals like you enable us to keep registration fees affordable to all. We invite you to sponsor a C.C.Y.S.A. soccer team for 2018.

Sponsorships are available for \$150 for the first team and \$125 for subsequent teams. Please return this letter with a check made payable to C.C.Y.S.A. and return in our enclosed envelope by April 20th.

We are also offering the opportunity to sponsor a field. For \$150 we will make a banner with your organization's logo to hang on the soccer goal of one of the fields during the duration of the season.

Number of Team Sponsorships: (circle)    1        2        3

Number of field Sponsorships: (circle)    1        2

Use Previous Logo: (check) Yes \_\_\_\_\_ Email new logo to Hohmannm3@gmail.com

Sponsor Name(s): \_\_\_\_\_  
\_\_\_\_\_

Please attach logo information if a logo is needed: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

.....  
**Is there someone in your organization who is interested in coaching your team or being a team parent?**

Coach's name \_\_\_\_\_

Phone number \_\_\_\_\_ Address \_\_\_\_\_

Asst. Coach's name \_\_\_\_\_

Phone number \_\_\_\_\_ Address \_\_\_\_\_

Team Parent Name \_\_\_\_\_

Phone number \_\_\_\_\_ Address \_\_\_\_\_

Only the child of a sponsor/coach/assistant coach/team parent will be assigned to that team. No other team requests will be considered. Please indicate the child's name(s) on the appropriate line(s) below and circle appropriate playing nights, so we can attempt to match your son or daughter to your sponsoring team.

**PLEASE NOTE: A registration form must also be filled out for each child and payment received for his or her registration by the registration deadline!!!**

| Year of birth | Age group/Night<br>Circle night | Age Group/Gender<br>(Age as of Dec. 31, 2018) | Child's Name |
|---------------|---------------------------------|---|--------------|
|---------------|---------------------------------|---|--------------|

\* Willing to sponsor any age group to meet the needs of the areas youth \_\_\_\_\_

|           |                     |                            |       |
|-----------|---------------------|----------------------------|-------|
| 2013-2014 | U 6<br>M/W<br>T/TH  | 4 & 5 year old/COED        | _____ |
| 2011-2012 | U 8<br>M/W<br>T/TH  | 6 & 7 year old/COED        | _____ |
| 2009-2010 | U 10<br>M/W<br>T/TH | 8 & 9 year old/COED        | _____ |
| 2006-2008 | U 13<br>T/TH        | 10, 11 & 12 year old GIRLS | _____ |
| 2006-2008 | U 13<br>M/W         | 10, 11 & 12 year old BOYS  | _____ |
| 2001-2005 | U 18<br>T/TH        | 13 - 17 year old GIRLS     | _____ |
| 2001-2005 | U 18<br>M/W         | 13 - 17 year old BOYS      | _____ |

If you have any questions, please contact me at [Hohmannm3@gmail.com](mailto:Hohmannm3@gmail.com).  
Thank you in advance for supporting a very worthwhile endeavor.  
Sincerely,

Mitch Hohmann  
C.C.Y.S.A. President