



TOWN OF ROLESVILLE SPONSORSHIP FORM

Name or Organization: _____

Address: _____ State: _____ Zip Code: _____

Contact Person: _____

Office Phone: _____ Mobile Phone: _____ Fax: _____

Email: _____

Company Webpage: _____

Youth Sports Team Sponsorship Level:

- \$1,000- MVP – (1) Spring and (1) Fall baseball or softball team, (1) soccer team and (1) basketball team
- \$325- Individual team- (1) Spring or Fall, baseball or softball team
- \$200- Individual Soccer team
- \$200- Individual Basketball team

Jersey Color (For Baseball/Softball or Soccer):

Option #1 Jersey Color: _____ Option #2 Jersey Color: _____

Option #3 Jersey Color: _____

Please email your logo (.jpg file) to Eric.Jeffers@rolesville.nc.gov

Do you have a child participating?:

Name: _____ League: _____ Age: _____

Payment options:

- 1 Invoice
- Quarterly invoice (Only For: MVP level)

Please return to: Rolesville Parks & Recreation | PO BOX 250 | Rolesville, NC 27571

Office use only:

Amount Paid: _____ Check # or Cash: _____ Received By: _____ Date Received: _____