

SPONSOR APPLICATION FORM

PLEASE INDICATE YOUR CHOICE WITH AN (X)

_____ PREP TEAM (13) \$300.00

_____ MAJOR TEAM (14/15) \$300.00

_____ SENIOR TEAM (16/18) \$300.00

_____ PREP ALL STAR TEAM \$300.00

_____ 14 YR OLD ALL STAR TEAM \$300.00

_____ 15 YR OLD ALL STAR TEAM \$300.00

ADDRESS _____

TELEPHONE NUMBER (WORK) _____ (HOME) _____

E-MAIL _____ LINK TO BUISNESS _____

NAME OF BUISNESS _____ (NAME TO BE PLACED ON HAT) _____

IF YOU WOULD LIKE TO SPONSOR A SPECIFIC TEAM WITH YOUR SON OR GRANDCHILD ON IT, PLEASE INDICATE THE PLAYERS NAME IN THE SPACE BELOW (WE WILL DO OUR BEST TO ACCOMINDATE YOUR REQUEST)

PLEASE CHECK FOR NO SPONSOR PREFERENCE _____

Please fill out the form and mail your check to Danvers Babe Ruth Baseball, P.O. Box 2182, DANVERS MA, 01923

THANK YOU FOR YOUR SUPPORT

President - DBRB
Peter Marshall
978-799-0239