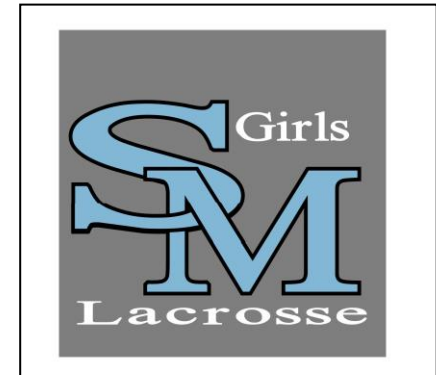


Individual Sponsorship Form

Sponsor's Name: _____

Address: _____



Donation Amount:

GOLD \$100

SILVER \$50

BRONZE \$25

OTHER

Name of SMGL Player: _____

Relationship to Player: _____

Make Checks Payable to: SM Girls Lacrosse

Mail this form and payment to:

Kelly Heide

2505 W 89th St.

Leawood, KS 66206

Questions? 816-797-4618

kheide@me.com