

# **CENTRAL NASSAU ATHLETIC ASSOCIATION**

---

## **SPONSOR INFORMATION**

**Contact Name:** \_\_\_\_\_

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

**Telephone:** \_\_\_\_\_

**Information as it should appear on your banner:**

**Business Name:** \_\_\_\_\_

**Town (optional):** \_\_\_\_\_

**Telephone:** \_\_\_\_\_

***\*\*Please remember the longer the line the smaller the print\*\****

***If you would like to sponsor a specific players team please indicate below.***

**Players Name:** \_\_\_\_\_

**Players division or age:** \_\_\_\_\_

**Web Site (optional):** \_\_\_\_\_