

CENTRAL CONNECTICUT YOUTH HOCKEY ASSOCIATION
PRACTICE JERSEY SPONSOR FORM

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Team To Sponsor: _____

Art Work For Jersey: (attach or fill in below)

Sponsor Amount - \$1,000.00

Make Checks Payable to : CCYHA

Mail To: : CCYHA

c/o Joseph D'Agostino, Jr.
1062 Barnes Road, Suite 304
Wallingford, CT 06492