

# RHAA Team/Sign Sponsorship – 2018

## Youth Baseball & Softball



Company Name: \_\_\_\_\_

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

Phone Number(s): \_\_\_\_\_

Contact Person: \_\_\_\_\_

E-Mail: \_\_\_\_\_

The RHAA fields see hundreds of visitors per day during the season. Being a sponsor of the RHAA program is a great way to show that a company is invested in its community and to advertise their business. For 2017, we continue to add the opportunity for companies wishing to sponsor teams in our very popular Fall-ball program, which runs from September through October. Companies may add a Fall-ball team sponsorship to their existing spring/summer league sponsorship for a nominal increase in fee. The table below shows the sponsorship cost structure:

	Without sign	With sign
<b>Team Sponsor – Summer ONLY</b>	<b>\$350</b>	<b>\$475</b>
<b>Team Sponsor – Summer + Fall</b>	<b>\$450</b>	<b>\$550</b>
<b>Sign ONLY</b>	<b>\$150/year</b>	

*Please select your RHAA sponsorship level for 2017 below*

<p><b>SUMMER TEAM SPONSOR</b></p> <p><input type="checkbox"/> <b>\$350 without sign</b></p> <p><input type="checkbox"/> <b>\$475 with sign</b></p>	<p><b>SUMMER <u>AND</u> FALL TEAM SPONSOR</b></p> <p><input type="checkbox"/> <b>\$450 without sign</b></p> <p><input type="checkbox"/> <b>\$550 with sign ← <i>Best Value!!!</i></b></p>
<p><b>SIGN ONLY (NO TEAM SPONSORSHIP)</b></p> <p><input type="checkbox"/> <b>\$150</b></p>	

**INFORMATION REQUIRED FOR TEAM SPONSORSHIP:**

Relative in program (if applicable):      Name \_\_\_\_\_      Age \_\_\_\_\_

Shirt Color:      1st choice - \_\_\_\_\_      2nd choice - \_\_\_\_\_

Lettering Color:      1st choice - \_\_\_\_\_      2nd choice - \_\_\_\_\_

Name on Shirt as shown below. Please email Tim Potter at [timpotter4@hotmail.com](mailto:timpotter4@hotmail.com) with questions:

**INFORMATION REQUIRED FOR SIGN SPONSORSHIP:**

Logo Attached -OR-  Message on Sign as shown below:

*Please note special Fonts and Colors (Limited to 2 colors on White Banner)*

RHAA Representative \_\_\_\_\_ Date \_\_\_\_\_

Please return completed form to; RHAA, P.O. Box 203, Henrietta, NY 14467

**We thank you for your support!!!**