

Sponsor's Name (exactly as it should appear in printed materials)

Contact Person and Phone Number

Street Address

E-mail Address

Website

City, State ZIP

[] Presenting Sponsor-\$5,000 (1 available)

- Be the only sponsor whose name/logo appears on all advance promotional materials including letters, registration forms, and event posters.
- Be the only sponsor acknowledged in all press releases, radio spots, and community event listings.
- Option to set up a company display table and distribute promotional materials at the tournament
- Logo displayed with a link to your website on CASA's web site and Facebook page.
- Prominent recognition at the Tournament
- Option to submit material for player bags
- 4 player registrations*

[] Match Sponsor-\$2,500 (2 available)

- Name/Logo displayed on event banner
- Option to set up a company display table and distribute promotional materials at the tournament
- Logo displayed with a link to your website on CASA's web site and Facebook page.
- Prominent Recognition at the Tournament
- Option to submit material for player bags
- 3 player registrations*

[] Set Sponsor-\$1,000

- Name/logo displayed on event banner
- Option to submit material for player bags
- 2 player registration*

[] Game Sponsor—\$500

- Name /logo displayed on event banner
- 2 player registrations*

[] Racket Sponsor-\$250

- Name/logo displayed on event banner
- 1 player registration*
- * A separate player registration form will be provided

Central Georgia CASA • 640 Plum Street, Suite 203 • Macon, GA 31204 • 478-238-6318 • www.cgcasa.org

According to Your Sponsor Level:

[] Please use my logo. I understand that I should email my logo to susanna.patterson@cgcasa.org no later than Friday, April 11, 2014.

[] I will not use my complimentary player registration(s); please allow someone else to use them.

Payment Options:

Please return this form with your donation. Your reply is requested by Friday, April 7, 2014.

[] My check, payable to Central Georgia CASA, is enclosed.

[] Please bill my credit card for \$_____

____Visa ___Mastercard ___Discover ___AmEx Card No. _____

Expiration_____ Security Code _____

Name on Card _____

Signature _____

Date _

If paying by credit card you may fax (478-238-6320) or email your reply to our office.