

# 2010 NCIL SPONSOR FORM

Sponsorship cost is \$200 per team. Make Check payable to: **NCIL BASEBALL**

Mail checks to: **NCIL BASEBALL**  
**181 E. Beaumont**  
**Columbus, Ohio 43214**

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

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

Website: \_\_\_\_\_

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

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

**IF** you wish to sponsor a certain **player, league, or team**, please enter:

Player's Name: \_\_\_\_\_

Player's League: \_\_\_\_\_

Player's Team: \_\_\_\_\_

\*\*\*Please note that frequently several sponsors ask for the same team or player, so it is possible you will not get the player and team you wish to sponsor.

**Please print clearly** the exact wording you want on the shirt:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

For your sponsorship fee you will receive:

- Your name on the team shirts
- Your own team shirt and game schedule
- Framed team photo
- Complete listing of all sponsors distributed to parents via email
- Your information listed on the NCIL website - [www.NCILbaseball.com](http://www.NCILbaseball.com).  
Please provide an image no larger than 250x100 pixels.

**Questions?** Please call Teresa Shay Tompkins at 314-0152 or  
[Teresa.tompkins@hyatt.com](mailto:Teresa.tompkins@hyatt.com)

**PLEASE RETURN THIS FORM ONLY IF SPONSORING A TEAM**