



# MOTHER LODE YOUTH SOCCER LEAGUE

PO BOX 1504

JACKSON, CA 95642

[WWW.MLYSL.COM](http://WWW.MLYSL.COM)



## SPONSORSHIP REQUEST FORM

Please check the following boxes that apply and return this form and your sponsor check made payable to MLYSL, NO later than May 31<sup>st</sup> to the above PO Box or a MLYSL Board Member.

- Silver Sponsorship (\$250.00).
- Gold Sponsorship (\$400.00)
- We wish to sponsor a MLYSL team and have no team or area preference.
- We wish to sponsor a specific MLYSL team:

By Child's Name \_\_\_\_\_

By Coach's Name \_\_\_\_\_

By Area \_\_\_\_\_

By Age Group \_\_\_\_\_

### NAME TO BE PRINTED ON PLAYER'S JERSEY

Name of Business \_\_\_\_\_

Mailing Address \_\_\_\_\_

Phone Number \_\_\_\_\_ Contact Name \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Date Received _____	Cash	Check # _____
Signature _____		

*MLYSL thanks you for your support of the youth of Amador County*