



Alief Youth Association

P.O. Box 720092

Houston, TX 77272-0092

(281) 879-1728

SPONSORSHIP AGREEMENT

The Alief Youth Association is pleased to recognize:

Company Name _____

Phone Number _____

Mailing Address _____

Contact Name _____

City _____

State _____

Zip Code _____

as the Sponsor of the Spring/Fall 20_____
(Circle One)

Division (age group) _____

Team Name _____

Subject to the following Terms and Conditions:

Sponsor agrees to: Remit payment upon the execution of this agreement.

AYA agrees to: Display Sponsor's Name on Team Jerseys (limit 1 sponsor per team)

List Sponsor's Name in Season Program

List Sponsor's Name, Logo and Website Link (where applicable) on AYA website

Provide an 8x10 Appreciation Plaque with Team Photo (sponsorships of \$200 or more)

EACH A.Y.A. TEAM IS RESPONSIBLE FOR OBTAINING SPONSORSHIPS TOTTALLING \$400 MINIMUM.

PROGRAM/ WEBSITE LISTING

Sponsor's Name _____

Address _____

City _____

State _____

Zip _____

Phone Number _____

Website Address _____

SPONSOR NAME IMPRINT



PLEASE INDICATE
PREFERRED IMPRINT STYLE

OPTION A 2" Letters (1 Line x 20 spaces)

- OR -

OPTION B 1" Letters (2 Lines x approx 20 spaces)

- OR -

OPTION C Please do NOT print our name on the jerseys.

PAYMENT INFORMATION

MAKE CHECKS

PAYABLE TO

A.Y.A.

Total Sponsorship \$ _____

Cash Payment - \$ _____

Check Payment - \$ _____

Check # _____

Sponsor agrees to all terms and conditions stated above and affirms no representations other than those printed on this form have been made on behalf of the Alief Youth Association. The undersigned has full authority to enter this agreement. In all efforts requiring collection of this money, the Sponsor agrees to pay all associated costs.

X

Sponsor's Acceptance (authorized signature) _____

Date _____

All sponsorships of AYA teams
are fully tax deductible.

AYA TAX ID # 74-1591068

AYA agrees to all the terms and conditions stated above. No representation other than those printed on this form shall be honored. All agreements must be accepted by the Alief Youth Association to be considered valid

AYA Acceptance (authorized signature) _____

Date _____