

Idaho Falls Babe Ruth



Sponsorship Form



Sponsor #1

Sponsor's Company Name: _____

Sponsor's Contact Name: _____

Sponsor's Address: _____

City: _____ State: _____ Zip _____

Phone: _____

Sponsor's Donation Amount: _____

Sponsor #2

Sponsor's Company Name: _____

Sponsor's Contact Name: _____

Sponsor's Address: _____

City: _____ State: _____ Zip _____

Phone: _____

Sponsor's Donation Amount: _____

Team Name for Sponsor: _____

Coach Name: _____

Division: 13 _____ 14 _____ 15 _____

Complete this form and present a copy to the sponsor as a receipt of payment.
Please turn in your sponsorship money to your High School Rep or the League Chairman.