



# SPONSORSHIP CONTRACT

Company/Sponsor Name \_\_\_\_\_

Address \_\_\_\_\_

Contact Name \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

## **PACKAGES**

**Bronze (\$300)**

**Silver (\$500)**

**Gold (\$1,000)**

**Platinum (\$1,500)**

Signature \_\_\_\_\_

*Make checks payable to: Olivet High School Athletics*

*Mail payments to: Matt Seidl, Athletic Director*

*Olivet High School*

*255 First Street*

*Olivet, MI 49076*