



Pacifica American Little League

P.O. Box 847 • Pacifica, CA 94044

www.pallball.org

2019 SPONSORSHIP FORM

Name of Business or Family Name	
Contact Name & Title	
Business or Family Address	
Phone Number	
Email Address	
Sponsorship Level	() Gold Level \$1000+ () Silver Level \$500 () Bronze Level \$250
If you have sponsored in the past year, would you like to keep your current banner?	<input type="checkbox"/> Yes <input type="checkbox"/> No Comments:
If you have a preference for which team(s) you would like to sponsor, list the team name, coach's name and/or player's name. * Requests will be met to the best of our ability and are not guaranteed.	
Year you first became a Little League Sponsor	
\$ Amount Enclosed	

Please include a business card along with your completed form and check payable to: Pacifica American Little League

Mail to: Pacifica American Little League
PALL Sponsorship Program
P.O. Box 847, Pacifica, CA 94044

Thank you on behalf of all of the Pacifica children who will benefit from your generosity.

Check #: _____ Team Assigned: _____

Amount: _____ Manager: _____

Pacifica American Little League appreciates your support!

League Use Only

Check # _____

Amount: _____

Team Assigned: _____

Manager: _____