



Petal Sports Association 2018 Sponsorship Form

Sponsorship of a Team does not guarantee your child a spot with a certain coach or another player. The only thing we can guarantee is that your child will be on your sponsored team.

Business Name: _____

Address: _____

Contact Person: _____

Telephone: _____ E-mail Address: _____

Check which sport is are sponsoring: Baseball or Softball

Player Info: Name _____ Age Group _____ Relationship _____

Type	Select	Cost	Notes:
Base Hit			
Double			
Triple			
Field			
New Sign			
Total			
Paid/Date			

Field Sponsors will require a 4 year contract

Do we have your LOGO on Digits? Yes No If **NO** please email it to:
admin@petalsportsassociation.com Questions Contact Shannon 601-402-7299

Mailing Address: Petal Sports Association, P.O Box 191, Petal, MS. 39465

Please make Checks out to Petal Sports Association Inc.

Any additional comments:

_____ Name

_____ Title

Derek Hall

PSA Athletic Director