



**ATLANTA FIRE UNITED SOCCER ASSOCIATION**

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**TEAM SPONSORSHIP FORM**

Sponsor's Name \_\_\_\_\_

Contact: \_\_\_\_\_ Phone # \_\_\_\_\_

Address: \_\_\_\_\_

Website/Email \_\_\_\_\_

Type of Sponsorship: (Please check one)      Business \_\_\_\_\_      Individual \_\_\_\_\_  
Please choose one: Plaque \_\_\_\_\_      Sponsor Mug \_\_\_\_\_

Signature of Sponsor \_\_\_\_\_

**Level of Sponsorship (Please Check one of the following)**

Full Year Sponsor for \$250.00

Name on Club Website  
Plaque or Sponsor Mug

Single Season Sponsor for \$150.00

Name on Club Website  
Plaque or Sponsor Mug

Other Donations (Amount \_\_\_\_\_)

Name on Club Website (minimum \$50.00)

Other Donations (Amount \_\_\_\_\_)

Sponsorship for: Fall \_\_\_\_\_ Spring \_\_\_\_\_ Both \_\_\_\_\_

Please make all checks payable to AFUSA and mail to above address

**To be completed by Team Coach or Team Manager** (please print clearly)

Team's Bank Account Name: \_\_\_\_\_

Team Name: \_\_\_\_\_ Age Group (i.e. U10, U11, etc.) \_\_\_\_\_

Coach: \_\_\_\_\_ Phone # \_\_\_\_\_

Team Manager: \_\_\_\_\_ Phone # \_\_\_\_\_

Address: \_\_\_\_\_

