

I agree to sponsor the following team(s):

Youth Basketball 4-13 yrs. old

_____ Teams @ \$200 = _____

Winter _____ Spring _____ Summer _____

Youth Tackle Football 10-12 yrs. old

_____ Teams @ \$400 = _____

Youth Flag Football 4-12 yrs. old

_____ Teams @ \$200 = _____

Youth Volleyball 8-14 yrs. old

_____ Teams @ \$200 = _____

Fall _____ Summer _____

Youth Summer Soccer 4-7 yrs. old

_____ Teams @ \$200 = _____

**PLEASE INDICATE IF YOU WOULD LIKE TO
RECEIVE A COMPLIMENTARY SPONSOR
PLAQUE**

(YES)

(NO)



Yes, I want to be a Y Partner and Sponsor Kerr County YMCA Youth

COMPANY/ORGANIZATION _____

ADDRESS _____ **CITY/ZIP** _____ **PH** _____

CONTACT PERSON:

First Name _____ **Last Name** _____ **SIGNATURE** _____

Please indicate if you would like to sponsor a specific child's team. If there is not a specific child's team you wish to sponsor, we will use your sponsorship where it is most needed.

CHILD'S NAME _____ **SPORT** _____

**Please remit this page
with Payment to:**

**Kerr County YMCA
P.O. Box 290188
Kerrville, TX 78029
or Fax to: 830-896-6909**

**If you have any questions please call
Chris Ramirez, Sports Director
at 830-896-8000**

Check # _____

Visa/MC # _____ **exp date** _____ **Name on card:** _____

Please clearly print Sponsor name in the boxes below for uniform purposes.

YMCA Mission: To put Judeo-Christian principles into practice through programs that build healthy spirit, mind and body for all.