

# CAPITAL DISTRICT SENIOR

## SOFTBALL, INC.



"Promoting Friendship and Fellowship through Senior Softball"

### Sponsor Information (please print or type)

Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Telephone (business): \_\_\_\_\_

E-Mail: \_\_\_\_\_

### Pledge Information

I (we) pledge a total of \$ \_\_\_\_\_ to sponsor a team named \_\_\_\_\_  
Capital District Senior Softball Inc. requests team sponsorship fees to be paid by March 1<sup>st</sup> of the new 2018 league season due to vendor screen printing lead times for team hats and shirts.

Team Sponsorship costs \$350 per season.

I (we) plan to make this contribution in the form of  Cash or  Check.

### Acknowledgement Information

Please use the following name(s) in all acknowledgements:

Print Name of Donor: \_\_\_\_\_

Signature(s): \_\_\_\_\_

Date: \_\_\_\_\_

Please make tax deductible checks, corporate matches, or other Gift payments to:

Capital District Senior Softball League Inc.  
P.O. Box 231  
Clifton Park, NY 12065

Thank You for Your Generous Support!

Sincerely, CDSSL., Inc.