



Direct Sponsorship Form

Date submitted:

Submit form to:

Shannon Brown, Sponsorship Board

Sponsor Information:

Business Name (Applicable):

Contact Name:

Address:

Phone & Email address:

Website:

Submitted by:

Type of Sponsorship:

- Please indicate your sponsorship choice.

I would like to sponsor a player of the St. Jude Knights Hockey Club.

Player Name:

Level:

I would like to sponsor the St. Jude Knights Hockey Club organization.

Sponsorship Type:

Level:

(up to 20% of any sponsorship donation submitted by a player/family will go back to their ice fees)

For Office Use Only

Form Submitted Date:

Thank You/Receipt

Date Sent:

Notes:

*Please provide us with a logo in EPS format in order to have your banner created. The logo should be emailed

to: sbrown.stjudehockey@gmail.com

*Please mail check and completed form to:

St. Jude Knights Hockey Club

Sponsorship

5505 W. 127th St

Crestwood, IL 60418