



VESTAL RECREATIONAL YOUTH SOCCER ASSOCIATION
 Affiliated with NYSWYSA, USYSA, USSF and the Federation Internationale de Football Assoc. (FIFA)
<http://www.vrysa.org>

Sponsor Contract

Please complete the form in its entirety so we can accommodate all special requests and include address information so team plaque can be delivered at end of season.

Please PRINT legibly and answer all questions:

Corporate Name: _____

Team Name (if different) : _____

Address: _____

City: _____ State: _____ Zip: _____

Contact Person: _____ Phone: _____

Email: _____

Can we publish the sponsor's name in VRYSA's web site: () Yes () No

Sponsor's Web Address : _____
 (OPTIONAL: URL for VRYSA's Web site to link)

Special Requests: (Player's name and/or color of T-shirt if available, please make 1st, 2nd 3rd choice of shirt color)

Available Colors: Red - Green - Purple - Orange - Blue - Gold - Pink - Black - Silver Other(if available)

Age division of Year of Birth (circle division):	<u>BOYS</u>	<u>GIRLS</u>	<u>CO-ED</u>
			2010
	06-07	06-07	2011
	08-09	08-09	12/13
			01/05

I, the undersigned, agree to sponsor _____ (enter number of teams) team(s) in the Vestal Recreational Youth Soccer Association for the 2017 season at the cost of \$125.00 per team.

 (Print Authorized Name)

 (Authorized Signature)

 (Date)

PLEASE RETURN CONTRACT & SPONSOR FEE TO:

**BECKY MERGES
 420 PINECREST RD.
 VESTAL, NY 13850
 765-2886**

MAKES CHECKS PAYABLE TO VRYSA

FOR VRYSA USE ONLY

Check # _____

Date received _____

Date deposited _____