



Recreational Sports Team Sponsorship Request Form

Please allow 2 weeks for check processing

Date of Request: _____ Due Date of Registration: _____

Amount Requested: \$_____ Delivery Method for Check (circle one): **mail** or **pick up**
(league entry/registration fees only)

Requested Sponsorship Location (circle one):

Cedar Park

Other _____

Season: _____ Dates of Play: _____

Sport: _____

of Team Members: _____ # of Games: _____

Location of Games: _____

Division (circle one): **Men's** **Women's** **Coed**

League (ie: Austin SSC): _____

Make Checks Payable to (please also include address):

Have you been sponsored by a Maggiore's location in the past? **Yes** **No**

If so, when: _____

Team Name: _____

Team Representative #1

Name: _____

Phone: _____ E-mail: _____

Team Representative #2

Name: _____

Phone: _____ E-mail: _____

Team Mailing Address Attention: _____

Street: _____

City: _____ State: _____ Zip: _____

Terms of Agreement

By signing this request form, you agree that if your team is granted sponsorship by Maggiore's, you will provide the following in return:

- Place the Maggiore's logo on your t-shirts/jerseys at the team's expense (must be reported as complete through email, with confirmation)
- Hold a minimum of two (2) team dinners at your sponsoring location (must be scheduled with the location and report the dates through email)
- Provide a copy of the registration receipt issued to you by the league (i.e.: City of Austin)
- Team Shirt or Jersey (To Display at the Store)
- Team Photo (8 ½" x 11")

Upon granting sponsorship Maggiore's agrees to provide the following:

- A check for the agreed upon sponsorship amount (must be made payable to the League the team will play in, i.e.: City of Austin).
- Access to the Maggiore's registered logo

Team Representative Signature

Date

Please return to:

1420 Cypress Creek Rd, Suite #1000
Cedar Park, TX 78613
Or Email: info@magstexas.com

Office Use Only:

Date approved: _____ Amount approved: _____ Charge code: _____

Approved by: _____ Date of check request to accounting: _____

Date Team Rep was called for Pick Up or with Mail Confirmation: _____

League Receipt Received: _____ Uniforms Confirmed: _____

Date First Team Dinner: _____ Date Second Team Dinner: _____