











## Spartans Hockey Club Sponsorship Form

| Sponsorship Includes   | One<br>Timer  | Slap<br>Shot  | Hat<br>Trick  | Stanley<br>Cup  | Write-In<br>Amount  |
|--|---|---|---|---|---|
| Recognition on website<br>with link to your business<br>page |  |  |  |  | Includes options<br>closest to, but not<br>exceeding, write-in<br>level |
| Shout-out on Spartans<br>social media platforms              |   |  |  |  |   |
| Team Sponsor Plaque  |   |   |  |  |   |
| Company name printed in<br>Senior Night program              |   |   |   |  |   |
| Sponsorship Year _____                                       |   |   |   |   |   |
| <b>Cost:</b>   | <b>\$250</b>  | <b>\$500</b>  | <b>\$1,000</b>  | <b>\$2,500</b>  | <b>\$ _____</b>   |
| Select Desired Level:  | <input type="checkbox"/>  | <input type="checkbox"/>  | <input type="checkbox"/>  | <input type="checkbox"/>  | <input type="checkbox"/>  |



**Become a Champion!**  
**Support Spartans Hockey Club**

**Checks Payable to**  
**"Spartans Hockey Club"**

**Please complete the following:**

|  |  |
|--|--|
| <b>Business Name (as you would like it to appear):</b> |  |
| <b>Contact Name:</b>                                   |  |
| <b>Address:</b>  |  |
| <b>Phone:</b>  |  |
| <b>Email:</b>  |  |
| <b>Website:</b>  |  |
| <b>Player who shared this opportunity with you:</b>    |  |

**Questions?**

**Contact Treasurer**  
**[treasurer@spartanshockeyclub.org](mailto:treasurer@spartanshockeyclub.org)**  
**[www.spartanshockeyclub.org](http://www.spartanshockeyclub.org)**

**Mail to:**  
**Spartans Hockey Club**  
**P.O. Box 771**  
**Lockport, IL 60441**