



SISTERS ANNUAL LACROSSE INVITATIONAL SPONSORSHIP FORM

Company Name: _____

Contact Person: _____ Phone: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Email Address: _____

Sponsor Levels

Please Check One

- Presenting : \$5,000
- Gold: \$2,500
- Division Sponsor: \$1,000
- Silver: \$500
- Friends of SALI: \$250

Please make checks payable to: Sisters Parks & Recreation District (SPRD) with
"SALI LAX" in the memo line.

Mail to: SPRD PO Box 2215, Sisters, OR 97759



For Office Use Only:

Check Received On: _____ Check #: _____

Logo Received: _____ Logo Posted to SALI Website: _____