



## South Kent Minor Hockey Association Sponsorship Program

### Local League Team Sponsorship Options

Options	Full Team Sponsorship	Home Team Sponsorship	Away Team Sponsorship
1 Year Commitment	\$800 / Year	\$600 / Year	\$400 / Year
2 Year Commitment	\$750 / Year	\$550 / Year	\$350 / Year
3 Year Commitment	\$700 / Year	\$500 / Year	\$300 / Year
Features			
<b>Jersey</b>	Your business Name on a complete set (Home & Away) of team Jerseys	Your business Name on a set of team home Jerseys	Your business Name on a set of team Away Jerseys
<b>Team Name</b>	Sponsored team will be named after your business	N/A	N/A
<b>Web Media #1</b>	Your company Logo will be featured on the SKMHA website Sponsorship & team pages as well as a link to your website	Your company Logo will be featured on the SKMHA website Sponsorship & team pages as well as a link to your website	Your company Logo will be featured on the SKMHA website Sponsorship & team pages as well as a link to your website
<b>Web Media #2</b>	Your company Logo & website link will be added to the SKMHA facebook page	Your company Logo & website link will be added to the SKMHA facebook page	Your company Logo & website link will be added to the SKMHA facebook page
<b>News Paper Ads # 1</b>	Your business will be noted in all team news releases	You buiness will be noted in all Home game news releases	You buiness will be noted in all away game news releases
<b>News Paper Ads # 2</b>	Your business name will be included in a thank you ad	Your business name will be included in a thank you ad	Your business name will be included in a thank you ad
<b>Team Photo</b>	Team Photo will be provided	Team Photo will be provided	Team Photo will be provided
<b>Marketing Receipt</b>	Reciept Provided for Marketing Expenses	Reciept Provided for Marketing Expenses	Reciept Provided for Marketing Expenses

SKMHA Agrees on the following sponsorship with:

For: \_\_\_\_\_ Year Full Team Sponsorship

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Receipt: \$ \_\_\_\_\_ Full Per Year (circle one) \$ \_\_\_\_\_ / Yr. Paid Annually in Aug.

Sponsor Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Contact Name: \_\_\_\_\_

SKMHA Representative \_\_\_\_\_

Photocopy - SKMHA and Sponsor each keep a copy.