



BLOOMINGTON YOUTH HOCKEY Sponsorship Agreement

Name _____

Business Name _____

Address _____

City/State/Zip _____

Phone Number _____ Email _____

Website _____

Please email your logo (PNG or JPEG) to fundraising@bloomingtonyouthhockey.com

Enclosed is my tax-deductible gift of \$ _____

I would like my donation applied toward:

- ☐ \$500+ HAT TRICK BYH Organization Sponsor
- ☐ \$250+ PLAYMAKER BYH Organization Sponsor
- ☐ \$250+ PLAYMAKER Team Sponsor

-Specify team name or player on team:

- ☐ Other:
- ☐ Description of donated goods or services:

Please make checks payable to BYH and place in the drop box at the rink or mail to:

Bloomington Youth Hockey, PO Box 3454, Bloomington, IL 61702