



SPOSORSHIP REQUEST FORM

Organization Name _____

Address _____

Contact Person: _____

Bus # _____ Cellphone# _____

E-mail: _____

Please sent your logo details to our email ocalaminimatch@gmail.com

Your products of Service: _____

For more information visit www.floridafunminimatch.org

I, understand, agree that my signature ensures payment of the above stated amount of the Florida Fun Mini-Match. Checks should be made to Sway with me. I understand that advertising material such as logos, and banners due to The Florida Mini-Match Chairman by January 9, 2022. Graphics for advertisements should be e-mailed to ocalaminimatch@gmail.com. I also understand that all sponsorship funds are to be paid in full and turned in with this contract by January 9, 2022.

Sponsor request Signature: _____ Date: _____

Mini-Match Administrative Signature: _____ Date: _____

WE ARE APRTIATE ANY HELP TO RUN THIS EVENT!!!

Please make payment & registration form:

Sway with me

411 Wanut Dr, St Johns , Fl 32259

