



2601 AVE OF THE STARS

FRISCO, TX 75034

SPONSOR INFORMATION SHEET

Thank you for offering to sponsor a team and/or individual player at TAV Volleyball. It is through the generous support of companies and individuals like you that we are able to provide a way for these young ladies to participate in this program. If you have any questions, please email Ashlee Gaston (agaston@dallasstars.com).

SPONSOR/COMPANY

NAME: _____

ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE #: _____

CONTACT PERSON: _____

EMAIL: _____

PLEASE CIRCLE WHICH GROUP YOU WOULD LIKE TO SPONSOR. ALSO, IF THERE IS A SPECIFIC PLAYER OR TEAM THAT YOU WOULD LIKE TO SPONSOR, PLEASE LIST THE CHILD'S NAME BELOW AND THE AMOUNT YOU WOULD LIKE TO DONATE.

SPONSOR FEE:

TAV CARROLLTON TAV FORT WORTH TAV SOUTH TAV AMARILLO

PLAYER'S NAME/TEAM NAME (OPTIONAL): _____

AMOUNT DONATING: \$_____

*This form and monies collected may be mailed in to the above TAV address with Attn: Ashlee Gaston.