



2018-2019 Interior Youth Basketball Sponsorship Form

Please check which division and gender you are sponsoring. If you wish to sponsor a particular child or coach, please write their name below. That player will receive a \$50 discount on their registration. (One player per team.)

FALL: mid-Sept. – Nov. 2018

MINOR DIVISION (3rd & 4th Grade)

Girls

Boys

No Gender Preference

MAJOR DIVISION (5th & 6th Grade)

Girls

Boys

No Gender Preference

SENIOR DIVISION (9th – 12th Grade)

Girls

Boys

No Gender Preference

NO AGE OR GENDER PREFERENCE

Your commitment is requested by Aug. 24, 2018 to select your shirt color. After 8/24/18 special color requests may not be available. Shirt color requests for all divisions are honored on a first come, first served basis.

WINTER: Jan. – mid-March 2019

JUNIOR DIVISION (7th & 8th Grade)

Girls

Boys

LITTLE DRIBBLERS - 2nd Grade Coed

NO AGE OR GENDER PREFERENCE

Your commitment is requested by Dec. 7, 2018 to select your shirt color. After 12/7/18 special color requests may not be available.

SPRING: mid-March – April 2019

LITTLE DRIBBLERS K-1st Grade Coed

Your commitment is requested by Feb. 22, 2019 to select your shirt color. After 2/22/19 special color requests may not be available.

of team(s) _____ x \$250/ea. \$ _____

Add a **THIRD** team for \$100 \$ _____

Scholarship Fund (Any Amt.) \$ _____

(To assist players in need with registration fees.)

Total amount enclosed \$ _____

Contact the Program Coordinator if sponsoring more than three teams.

You may also make your selections & pay online at www.interioryouthbasketball.com 

OR register your sponsorship online and pay by check! (Mailing address below.)

Please send me an invoice via Email / Regular Mail Receipt (Circle one) My information is below.

I wish to pay with a Credit Card. CC#: _____ - _____ - _____ - _____ Exp.: ____/____/____
3 Digit Security Code: _____ Email / Regular Mail Receipt (Circle one): ____ Yes ____ No

I wish to pay with by check. Ck#: _____ (Please mail this form w/check to address below.)

SPONSOR/TEAM NAME: _____

CONTACT NAME: _____

ADDRESS, CITY, ZIP: _____

PHONE & EMAIL: _____

COACH'S NAME: _____

CHILD'S NAME: _____

T-SHIRT COLOR: _____

Your company's logo or a text version of your business name will be printed on the front of the team jersey in a single color (black or white depending on the shirt color.) If we don't have your logo on file, please email camera ready art in .ai or .eps format if possible. .pdf or .jpg will do if that's all you have. Email a high resolution, color .jpg for the IYB website! Please include a copy of this form with your contribution.

A 501(C)(3) Tax Exempt Organization (92-0101376)

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