



2025 YOUTH T-BALL SPONSORSHIP APPLICATION

_____ **Yes, I will sponsor a 2025 Youth T-Ball Team ~ \$200**

_____ Please send me an invoice (payment is due on or before April 18th, 2025).

_____ Payment enclosed

Business Name (for team shirt sponsorship):

Business Owner's Name:

Business Mailing Address:

Business Email Address:

Business Phone Number:

(_____) _____

_____ I have a child that will be participating in the program and I want to sponsor his/her team.

My child's name is _____

My child is in _____ grade at _____ school.

Please make checks payable to:

**City of Atascadero
6500 Palma Ave.
Atascadero, CA 93422**

Signature: _____ **Date:** _____

This agreement shall be for the 2025 Atascadero T-Ball League starting April 8th and ending May 22nd 2025.
The City of Atascadero shall not be held liable for loss or damage to private property. Sponsorship is binding.

For more information please call 470-3360

FOR OFFICE USE ONLY ~ Activity # 6600.825

Receipt #: _____ Date: _____ Staff Initials: _____