



Sponsor Information Form

Sponsor Name: _____

Contact Person: _____

Address: _____

_____ Postal Code _____

Phone Number: _____

Email Address: _____

Jersey Preference: Block lettering to read _____

Logo (jpg must be provided)

If you have a specific request to sponsor a specific team, complete the following:

Player: _____ Team: _____

Division: _____ Coach: _____

Rec Centre: _____ Requests honoured as available.

Please forward along with your cheque for \$250.00 per team to:

Hamilton Basketball Association (HBA)
2-558 Upper Gage Avenue, Suite 271
Hamilton, ON
L8V 4J6

