
LARCHMONT MAMARONECK BASKETBALL ASSOCIATION (LMBA)

LMBAbasketball.com

2009-2010 SPONSOR REGISTRATION FORM

SPONSOR NAME: _____

ADDRESS: _____

PHONE NUMBER: _____

E-MAIL ADDRESS: _____

CONTACT NAME: _____

NAME ON T-SHIRTS: _____

DO YOU WISH TO RECEIVE A SPONOR'S PLAQUE?: _____

NUMBER OF TEAMS SPONSORED: _____

DIVISION(S) (if desired, e.g. 3rd Grade Girls): _____

PLAYER ON TEAM (if desired): _____

COACH OF TEAM (if desired): _____

SPONSOR'S FEE: \$175.00 PER TEAM

PLEASE MAKE CHECKS PAYABLE TO: LMBA

Please mail completed form and payment to:

LMBA Sponsor
c/o Matt Jacobs
28 Walnut Av
Larchmont NY 10538

HIGHLY CONFIDENTIAL