WEST MANCHESTER SPONSORSHIP/ADVERTISING FORM

Company/Individual Name (if applicable): _____

Contact Person: _____

Address: _____

Email: _____ Phone Number: _____

Website/Facebook: _____

Type of Sponsorship

☐ Annual

- ☐ Platinum $5,000
- ☐ Gold $2,500
- ☐ Silver $1,000
- ☐ Bronze $500
- ☐ Community Friend < $250

☐ Event / Program Specific If selected, please specify: _____

☐ Newsletter

☐ Athletic Field Banner

Total Sponsorship: $ _____

Sponsor Signature: _____ Date: _____

Please make check payable and mail check to:

West Manchester Township
Attn: Sponsorship
380 E Berlin Rd York, PA 17408

Donations may be tax-deductible: West Manchester Township Tax ID# 23-6050235

Email company logo/artwork to: info@wmtwp.com

OFFICE USE ONLY

Rental Fees and Requirements: _____

Date Received: _____ Payment Check #: _____ Staff Initials: ____