## SPONSORSHIP APPLICATION

Business Name:		
Phone:	Fax:	
Address:		
City:	State: Zi	p Code:
Owner/Manager Name:		
Owner/Manager Signature:		
PR Contact (if different from above)	:	
Contact Email:		
Website:		
Sponsorship Level:	Amount:	Payment:
In-Kind Donations (Please describe	, including quantities and frequ	uency):

## **SPONSORSHIP LEVELS**

\$1,500 - \$2,500
\$1,000 - \$1,499
\$500 - \$999
\$350 - \$499
\$100 - \$349
\$25 - \$99

Company Logo:	Yes	No	Please attach logo artwork or email electronic copy to:
		<u>m o t c</u>	<u>own0721@gmail.com</u>

Please mail your completed form with payment to:

Oxnard High School Band Boosters (OHSBB)
P.O. Box 5461
Oxnard, CA 93031-5461

Questions regarding sponsorship can be directed to Moises Ramirez at (805) 816-5984

THANK YOU FOR YOUR SUPPORT!

For more information, visit the OHS Marching Band's website at <a href="http://www.ohsmarchingband.com">http://www.ohsmarchingband.com</a>