

Boca Hoops Travel

Sponsorship Form

Name: _____

Address: _____ City: _____ Zip: _____

Contact person: _____ Phone number: (____)-_____

Fax number: (____)-_____ e-mail _____

Team Age Group : _____

Number of Sponsorships _____ (\$400.00 per Team Sponsorship) Fee: \$ _____

Date Sent: _____ Date Received: _____

***CHECKS ARE PAYABLE TO: BOCA HOOPS, INC.**

Mail checks to:

**Boca Hoops Travel
C/o Boca Hoops, Inc.
P.O. Box 6068
Boca Raton, Florida 33427**

ALL FEES ARE TAX DEDUCTIBLE