



TIERED SPONSORSHIPS | 2018-2019

Tier 1-\$3,000

- 2 Honor Spotlight Game Sponsorships
(SPECIAL SHOUT OUT AT SPORTING EVENT OF YOUR CHOICE)
- 2 Snowbird Cash Raffle Tickets
- Individual Business Banner
(DISPLAYED AT SPORTING EVENTS)
- 1 Family Pass
- 1 Football Honor Game Program Sponsor
- 1 Fish Fry Sponsorship
- Business Highlights
(IN THE PARISH BULLETIN & PROMOTED ON FACEBOOK)
- Snowbird Swag

Tier 2-\$2,000

- 1 Honor Spotlight Game Sponsorship
(SPECIAL SHOUT OUT AT SPORTING EVENT OF YOUR CHOICE)
- 1 Snowbird Cash Raffle Ticket
- 1 Family Pass
- 1 Individual Business Banner
(DISPLAYED AT SPORTING EVENTS)
- Business Highlights
(IN THE PARISH BULLETIN & PROMOTED ON FACEBOOK)
- Snowbird Swag

Tier 3-\$1,000

- 1 Football Honor Game Program Sponsor
- 1 Individual Business Banner
(DISPLAYED AT SPORTING EVENTS)
- Family Pass
- Snowbird Swag

Tier 4-\$500

- 1 Honor Spotlight Game Sponsorship
(SPECIAL SHOUT OUT AT SPORTING EVENT OF YOUR CHOICE)
- Family Pass OR Name on GROUP Banner
(DISPLAYED AT SPORTING EVENTS)

Individual Athletic Offerings

1 Honor Spotlight Game Sponsorship	\$300
1 Family Pass	\$150
1 Snowbird Cash Raffle Ticket	\$100
1 Jersey Sponsorship for the Football Honor Game	\$200
1 Fish Fry Sponsorship	\$500

NOTE: BANNERS ARE ONLY BEING SOLD AS PART OF THE TIERED SPONSORSHIP OFFERING.



SPONSORSHIP FORM | 2018-2019

Business/Family Name: _____

Mailing Address: _____

Phone: _____

E-mail: _____

Please select which Tier/Individual Offerings you would like to purchase: *(see full package details on page 3)*

Tier 1: \$3,000

1 Fish Fry Sponsorship: \$500

Tier 2: \$2,000

Honor Spotlight Game: \$300

Tier 3: \$1,000

Jersey Sponsorship for Football Honor Game: \$200

Tier 4: \$500

Snowbird Cash Raffle Ticket: \$100

I am unable to purchase a package at this time,

but I would like to support St. Mary Cathedral School

Athletics. Please accept my tax deductible donation of \$_____.

Honor Spotlight Game: How would you like to be recognized both- Verbally: _____

In Print: _____

Which sporting event would you like your honor spotlight game announced? _____

Please indicate your desired method of payment:

Cash Check # _____ Sent to: St. Mary Cathedral: Athletics, 606 N Ohio Ave, Gaylord, MI 49735

Charge my credit card: IN FULL OR TWELVE MONTHLY PAYMENTS

Name as on card (please print): _____

Card # _____ - _____ - _____ - _____ Exp. Date: ____/____

3-Digit Verification Number _____ Total Amount: \$ _____

Signature (required): _____

I hereby authorize St. Mary Cathedral to charge my credit/debit card as noted above.