



Zebulon Parks and Recreation Team Sponsorship Application

1003 N. Arendell Ave.

Zebulon, NC 27597

Telephone: (919) 823-1815 Fax: (919) 269-6200

Email: jhardin@townofzebulon.org Web-Site: www.townofzebulon.org

I (WE) wish to sponsor ____ team(s) in the **20__** season **Cost:** \$300.00 each team **Total:** _____

Sponsor's Name: _____

Contact: _____

Sponsor Address: _____

Street/P.O. Box

City

State

Zip code

Telephone: _____

Sponsor

Contact (If different from Sponsor's)

Contact Email: _____

Mailing Address: _____

(If different from above)

PLEASE NOTE: APPLICATION AND CHECK MUST BE RECEIVED BEFORE THE START OF THE SEASON*
(*Before the first game is played*)

Please Make Checks Payable to: **ZPRD**

MAIL TO

OR

DROP OFF:

Zebulon Parks and Recreation

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Team Name on Shirt: _____

Colors (subject to availability): _____

Sponsor/Contact Signature: _____ Date: _____