

Corporate Sponsorship Form



HELOTES AG BOOSTER
SOUTH -N- YOUR MOUTH COOKOFF
BATTLE OF THE MEATS

Donor Information (please print or type)

Name

**Billing
address**

**City, ST Zip
Code**

**Phone 1 |
Phone 2**

Fax | Email

Information

SPONSORSHIP PACKAGE NAME _____

AMOUNT \$ _____ .

I (we) plan to make this contribution in the form of: ☐ cash ☐ check ☐ credit card ☐ other.

Acknowledgement Information

Please use the following name(s) in all acknowledgements: _____

**Please make checks:
HELOTES AG BOOSTER LAND**

**MAIL ALL PAYMENTS TO:
HELOTES AG BOOSTER
ATTN JENNIFER MOORE'
17430 BANDERA RD
HELOTES TX. 78023**