

**LAKE TRAVIS FOOTBALL BOOSTER CLUB**

**2011 SPONSOR FORM**

**Application for Sponsorship**

*(please also initial and include the appropriate sponsor package form)*

Please complete and send this form with your payment to:

**Lake Travis Football Booster Club**

**3322 Ranch Road 620 South**

**Austin, Texas 78738**

***Please note the Sponsors are not secure until payment has been received. Upon their discretion, the LTISD and/or the Lake Travis Football Booster Club has the right at any time to revoke, suspend or discontinue any or all sponsor benefits.***

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*The LT Football Booster Club qualifies as a charitable organization under IRS Code Section 501(c) (3) and as such, your contribution may be deducted on your Federal Income Tax return.*

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**Sponsor/Business Name:** \_\_\_\_\_ **Contact Person:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Work Phone:** \_\_\_\_\_ **Home Phone:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_ **Sponsor Last Year: Yes No** **Which Level:** \_\_\_\_\_

**Child Playing Football: Yes No** **Name of Player:** \_\_\_\_\_ **Grade:** \_\_\_\_\_

**By:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
**Sponsor/Contact Person**

**By:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
**Lake Travis Football Booster Club President**

**By:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
**Gary Briley – Director of Athletics LTISD**

**Sponsor Level:** \_\_\_\_\_ **Amount of Contribution:** \_\_\_\_\_ **Check #** \_\_\_\_\_ **Date:** \_\_\_\_\_

*Thank you for your generous financial support that will contribute to the continued development of a quality football program for the young men, women and fans of Lake Travis ISD.*