



7th Annual

Community Foundation of Southern Maryland Kickball Tournament

**Sunday, August 20, 2 p.m.
Hallowing Point Park, Prince Frederick**

- What** A benefit in the park that covers all the bases – fun, friendly competition, charity, and all day kickball!
- Who** You, your friends, family, co-workers, employees, club members, and whoever else!
- When** Sunday, August 20, 2 p.m. ~ Check-In 1:00 p.m.
- Where** Hallowing Point Park, Prince Frederick, MD 20678
- Why** To help make our community the best place to live and give.

Team Sponsorship Levels

(See sponsorship flyer for details)

Grand Slam = \$1500

Home Run = \$575

Triple Play = \$325

Individual = \$20

To Volunteer, Sponsor, Register or General Questions:

Contact Community Foundation of Southern Maryland

E director@cfsomd.org | O 240-670-4483(GIVE) | Web www.cfsomd.org



**COMMUNITY
FOUNDATION**
of Southern Maryland

Looking forward. Giving back.



7th Annual

Community Foundation of Southern Maryland Kickball Tournament

Sponsorship Opportunities:

Grand Slam Sponsor \$1500.00

(tax deductible amount \$1400.00)

Naming rights for the kickball tournament (Presented by)

Prime Business Logo with website and/or phone number on the back of all t-shirts

Promotional advertising on website and social media

Opportunity to advertise company banner at tournament

TWO Free teams entry of 10, including both male and female, 10 years or older

Free t-shirts (up to 20 players)

Home Run Sponsor \$575.00

(tax deductible amount \$475.00)

Prominent Business Logo on the back of all t-shirts

Promotional advertising on website and social media

Free team entry of 10, including both male and female, 10 years or older, if sponsoring a team

Free t-shirts (up to 10 players)

Triple Play Sponsor \$325.00

(tax deductible amount \$225.00)

Business Logo on the back of all t-shirts

Promotional advertising on website and social media

Individual \$20.00

(tax deductible amount \$10.00)

Free t-shirt

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Sponsorship/Registration Commitment Form

Please indicate sponsor level:

_____ **Grand Slam** \$1500
_____ **Home Run** \$575

_____ **Triple Play** \$325
_____ **Individual** \$20

Business/Individual's Name _____

Contact Name (if different from above) _____

Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

T-shirt Sizes _____ Team Color _____

Signature: _____ Date _____

Payment Information

We accept cash, check (Please make checks payable to CFSOMD) or Credit Card online at www.cfsomd.org

Donations are always welcomed and appreciated.

**Mail commitment form and payment to: CFSOMD
P.O. Box 716
Charlotte Hall, MD 20622**