Lindenwald Baseball Inc.
2010 SPONSOR FORM

I wish to participate in the sponsorship of a team for the upcoming season.

(Make check payable to LINDENWALD BASEBALL INC.)

Mail to:
Lindenwald Baseball Inc.
Attn: Walter A. Brunner, Treasurer
756 Forest Ave.
Hamilton, Ohio 45015

ENCLOSED IS MY SPONSOR FEE OF: $_____
($250.00 PER TEAM)

Sponsor Name: _____

Name: _____

Address: _____

City, State, Zip: _____

Phone No.: _____

_____ Yes, I will be able to attend opening day ceremonies.

_____ No, I will not be able to attend opening day ceremonies.

_____ Please send me a schedule of my sponsored team so that I may attend the games.