



**2023 ALL ABILITIES SOCCER PROGRAM
SPONSOR LETTER**

P.O. BOX 852 11151 Keele St. Maple, Ont. L6A 1S8

T. 905.832.0911 F. 905.832.0624

www.vaughansoccer.com

sarah.pellegrini@vaughansoccer.com

2023 Soccer Season

Dear Potential Sponsor,

Vaughan Soccer Club is a community based not for profit organization and we are embarking on our 11th season of providing soccer to children with special needs. We are very fortunate to have been able to offer this program free of charge to any child who has special needs and is between the ages of 5 and 18.

Field, uniform and equipment costs seem to rise every year, yet we believe in the program and we have faith in our community. We know this program makes a difference and we have learned firsthand how much this program is needed. With the support of businesses like yours, we can continue making sure that Vaughan Soccer Club leaves no athlete on the bench and has a program that meets the needs of every child.

Sponsorship is only \$300.00 and as a sponsor you will receive your company logo on our website with a direct link to your company's web-site (if applicable).

We have taken the liberty of providing you with a sponsor form and encourage you to contact us if you have any questions or need further information. We look forward to hearing from you and appreciate your time.

Sarah Pellegrini
All Abilities Soccer Program Director
Vaughan Soccer Club

A Little Action Makes a Big Difference



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SPONSORSHIP OF THIS PROGRAM ENTITLES SPONSOR TO THE FOLLOWING:

- SPONSOR NAME/LOGO ON VAUGHAN SOCCER CLUB WEB-SITE
- LINK TO SPONSOR'S COMPANY WEB-SITE ON VAUGHAN SOCCER WEB-SITE (if applicable)

COMPANY NAME: _____

ADDRESS: _____

CITY: _____ POSTAL CODE: _____

PHONE NO: _____

E-MAIL ADDRESS: _____

COMPANY CONTACT PERSON:

SPONSORSHIP AMOUNT: PLEASE CHECK ONE (1): \$300.00 or OTHER _____

(Cheques are to be made payable to: **Vaughan Soccer Club Inc.**)

SPONSOR SIGNATURE

DATE



VAUGHAN SOCCER CLUB OFFICE USE ONLY

PAYMENT METHOD: CHEQUE # _____ VISA MASTERCARD DEBIT

AUTHORIZATION NUMBER: _____ PAYMENT DATE: _____

PAYMENT RECEIVED BY: _____

THANK YOU FOR YOUR GENEROUS SUPPORT