

Maroochydore Roos

2017

SPONSORSHIP AGREEMENT



I would like to sponsor player

Name: _____ Company Name: _____

Address: _____

Telephone: _____ Mobile: _____

Fax: _____ Website : _____

Email Address: _____

Signature: _____ Date: _____

Payment Details:

TOTAL AMOUNT DUE:

Direct Deposit:

Acc Name: Maroochydore AFC

\$ _____

BSB: 484-799 Acc No: 505 436 630

Reference: PLAYERS SURNAME

Credit Card:

Name on credit card: _____

Card Number: _____/_____/_____/_____

Expiry Date: _____/_____ CCV: _____

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