



WARNER CHRISTIAN ACADEMY

Banner Sponsorship Order Form



Warner Christian Academy would like to promote your business at our athletic events. All proceeds from the banner sponsorship program will be used to support the athletic programs at Warner Christian Academy. We look forward to partnering with your business.

Below is a listing of the current banner size, placement and prices. Banners are displayed for one academic school year, August – June with renewals available prior to the beginning of the next school year. We can use your existing artwork, or we will work with you to create a professional banner that best reflects your business. Existing artwork should be provided in one of the following high resolution formats: eps, jpeg, tif, pdf or on a disc. Artwork should be emailed to boosters@wcaeagles.org.

Size	Location	Cost
4 ft. by 4 ft.	Inside Gym	\$250
4 ft. by 4 ft.	Outside Football or Baseball Field	\$250
4 ft. by 4 ft.	Both	\$400



Sincerely,
 Tammy Young
 Assistant Athletic Director
 1730 South Ridgewood Ave.
 South Daytona, FL 32119
tammy@wcaeagles.org
 (386) 767-5451 ext. 224

Please complete the registration form below:

What team are you sponsoring?

- Baseball
 Basketball
 C.C./Track
 Cheerleading
 Football
 Flag Football
 Soccer
 Tennis
 Volleyball
 Weightlifting
 Other:

Who contacted you for sponsorship? _____

Business Name _____ **Address** _____

City _____ **State** _____ **Zip** _____

Contact Name _____ **Phone** _____ **E-mail** _____

Please select payment method:

- Write a Check (make payable to WCA Boosters):** Attached is my check for the amount of: \$ _____
- Call in Your Credit Card Payment:** You may pay with a credit card by calling Tiffany McFarran 386-767-5451 ext: 240.
- Return Your Credit Card Payment:** You may pay with a credit card by filling out the following information.

For payment method number three, please print legibly and fill out the below information:

- Visa
 Master Card
 Discover
 American Express

Name (as it appears on credit card): _____

Credit Card #: _____ Exp. Date: _____ CVV: _____

(mm/yy)

(3 digit code)

Billing Address: _____ Zip: _____

Phone: _____ (City, State)

Please return completed form to Tammy Young in the Athletics Offices.