

SHAKOPEE SABERS WRESTLING



**September 10th 2022, 2nd ANNUAL
Shakopee Bowl**

(3020 133rd St W, Shakopee, MN 55379)

Sponsorship Opportunities

Event Sponsor \$2000 (Exclusive)

- Name/logo on website
- 2 adult Team registrations and 2 kids team registration (8 meal tickets)
- Company name/logo on cornhole lane
- Logo displayed on boards and sponsor gets a set of boards
- Company Banner displayed (3x6)
- *Sponsor provides tent/table and swag

Registration Sponsor \$1200 (Exclusive)

- Name/logo on website
- 2 Team registration (4 meal tickets)
- Company name/logo on cornhole lane
- Logo displayed on boards and sponsor gets a set of boards
- Banner display (3x6)
- Presence at registration table

League Sponsor \$1000 (3 available)

- (Kids/Social/Open League)
- Name/logo on website
- 1 Team registration (2 meal tickets)
- Name on League Tournament Banner (2.5x4)
- Logo displayed on boards and sponsor gets a set of boards

Board/Lane Sponsors \$500 (36 Available)

- Name/logo on website
- 1 Team registration (2 meal tickets)
- Company name/logo on cornhole lane Banner display

Scoreboard Sponsor \$150 (36 available)

- Name/logo on website
- Name/logo on lane scoreboard

Raffle/Silent Auction

- Name/logo on website + displayed with the items

All sponsorships are first come first serve

Contact Brian Sedleck @ 952-836-9059

Commitment Deadline of June 30th

SHAKOPEE WRESTLING AND BOOSTER CLUB THANKS YOU FOR YOUR SUPPORT

Sponsorship Desired

- ☐ **Event Sponsor (\$2000)** 1 available
- ☐ **Registration Sponsor (\$1200)** 1 available
- ☐ **League Sponsor (\$1000)** 3 available
- ☐ **Board/Lane Sponsor (\$500)** 36 available
- ☐ **Scoreboard Sponsor (\$150)** 36 available

TOTAL: _____

Company: _____
Address: _____
City/State/Zip: _____
Contact Name: _____
Phone: _____
Email: _____

Cornhole Team Information

Team One Name: _____
Player One Name: _____
Email: _____
Phone: _____
Player Two Name: _____
E-mail: _____

Team Two Name: _____
Player One Name: _____
Email: _____
Phone: _____
Player Two Name: _____
E-mail: _____
Phone: _____

Team Three Name: _____
Player One Name: _____
Email: _____
Phone: _____
Player Two Name: _____
E-mail: _____
Phone: _____

Team Four Name: _____
Player One Name: _____
Email: _____
Phone: _____
Player Two Name: _____
E-mail: _____
Phone: _____

Please enclose your check payable
to:
**Shakopee High School Wrestling
Booster Club
2104 French Trace Ave
Shakopee, MN 55379**