

**Parsippany Soccer Club**  
PO Box 212, Parsippany, NJ 07054  
[www.parsippanysoccerclub.org](http://www.parsippanysoccerclub.org)

*Parsippany Soccer Club is an IRS registered non-profit 501(c)3 Tax ID #22-2203326*

**Dear Corporate Neighbor,**

The Parsippany Soccer Club is preparing for the upcoming **2024 Fall** Intramural Soccer season and is seeking your help in sponsoring one (or more) of our teams. Our club relies heavily upon the generosity of local businesses and parents, like you, to support our players and our ever growing youth soccer program. As a good corporate neighbor you are promoting your brand and creating name recognition throughout our community. Your sponsorship will enable you to visit your team, meet the parents and coaches while you promote your business. We encourage you to attend games, provide promotional material, and reward your team's success. As a parent you may also consider sponsoring your child's team through your employer or with a creative name that your child will remember for years to come.

The cost to sponsor an Intramural Team is only **\$250.00 per season**. Your sponsorship enables us to subsidize the purchase of uniforms, equipment and training for the players and coaches on the team. It also provides you with the opportunity to have your business name (or the name of your choice) prominently printed on the front of the team's uniform. In addition, a team plaque will be presented to you after picture day and we encourage you to display it in your place of business.

Please complete the form below and mail it along with your check for \$250.00 payable to:

**Parsippany Soccer Club, % Intramural Sponsors**  
**P.O. Box 212**  
**Parsippany NJ 07054**

You can contact us at [sponsors-director@parsippanysoccerclub.org](mailto:sponsors-director@parsippanysoccerclub.org) or call me on my personal cell at 973-747-5617 if you have any questions or need additional information. Thank you for supporting our program!

**Robert Peluso**

*Director of Sponsorships*

*VP of Finance*

**Parsippany Soccer Club**

[robert.peluso@parsippanysoccerclub.org](mailto:robert.peluso@parsippanysoccerclub.org)

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**INTRAMURAL TEAM SPONSORSHIP FORM**  
**FALL 2024**

Name: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

**Sponsor Name to Appear on Uniform**

*(Please print clearly and in CAPITAL letters):*

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**Preferences / Special Requests**

*(Fill in the section below, **only** if you are requesting a specific player or age group)  
Sponsorship Availability is limited and requests may not be fulfilled.*

Player's Name: \_\_\_\_\_

I-U07 Coed \_\_\_\_\_ *(ages 5 to 7)*

I-U09 Coed \_\_\_\_\_ *(ages 7 to 9)*

I-U11 Coed \_\_\_\_\_ *(ages 9 to 11)*

I-U13 Boys \_\_\_\_\_ I-U13 Girls \_\_\_\_\_ *(ages 11 to 13)*

I-U15 Boys \_\_\_\_\_ I-U15 Girls \_\_\_\_\_ *(ages 13 to 15)*

I-U19 Boys \_\_\_\_\_ I-U19 Girls \_\_\_\_\_ *(ages 15 to 18)*

Special Requests: \_\_\_\_\_

**FALL SPONSOR FORMS MUST BE RECEIVED BY: JULY 31,2024**

**Please return this form and sponsorship check to:**

**Parsippany Soccer Club, c/o INTRAMURAL SPONSORS, P.O. Box 212, Parsippany NJ 07054**