

COON RAPIDS YOUTH HOCKEY ASSOCIATION

11091 Mississippi Blvd., Coon Rapids, MN 55433

Attn: Sponsorship Coordinator

A Non-Profit Organization

Donation/Sponsorship Acknowledgement Form

Sponsoring Organization: _____

Contact Name: _____

Address: _____

Telephone #'s: _____

Email: _____

Representation(Team or Association): _____

Hockey Season of Coverage: _____

Donation Amount(\$): _____

Sponsor

Date

CRYHA Representative/Team Manager

Date