



West Michigan Youth Soccer Association MSPSP Sponsorship Application

List all teams which will be playing indicated season

Submitting Club: _____ Season: _____ Year: _____

| | Age | Gender | Team Name |
|----|-----|--------|-----------|
| 1 | | | |
| 2 | | | |
| 3 | | | |
| 4 | | | |
| 5 | | | |
| 6 | | | |
| 7 | | | |
| 8 | | | |
| 9 | | | |
| 10 | | | |
| 11 | | | |
| 12 | | | |
| 13 | | | |
| 14 | | | |
| 15 | | | |
| 16 | | | |
| 17 | | | |
| 18 | | | |
| 19 | | | |
| 20 | | | |

Sponsoring Club Official: _____

Title: _____ Date: _____

Complete & email to Dana.Pope@wmyma.org