



Sheridan County Sportsmen's Association

Cancer Benefit Trap Shoot Sponsorship / Donation Form



Saturday, June 18, 2022 - 9 a.m.

_____ I would like to be a Cancer Benefit Shoot Sponsor

Company Name: _____

_____ \$2,500 Purple Shooter Sponsor

- 5-person Shooting Team
- Logo on all print/radio advertising
- Logo on all event materials
- Website recognition
- Facebook recognition
- Banner recognition during and after event
- Company logo (large-sized) on all t-shirts
- Logo (large sized) in thank you advertising after event

_____ \$1,000 Pink Shooter Sponsor

- 5-person Shooting Team
- Logo on all print/radio advertising
- Logo on all event materials
- Website recognition
- Facebook recognition
- Banner Recognition during and after event
- Company logo (medium sized) on all t-shirts
- Logo (medium sized) in thank you advertising after event

_____ Friend of the Cancer Benefit Trap Shoot

Amount \$ _____

I am paying for: _____ Sponsorship

_____ Check (payable to SCSA Cancer Benefit)

Mail checks to: SCSA, 601 Mountain Shadows Blvd.
Sheridan, WY 82801

Contact Name: _____

Address: _____ City _____ State _____ ZIP _____

Phone # _____ Email address _____

_____ \$500 Blue Shooter Sponsor

- 5-person Shooting Team
- Print/radio advertising
- Website recognition
- Facebook recognition
- Company logo (small) on all t-shirts
- Logo (small) in thank you advertising after event

_____ \$300 Green Shooter Sponsor

- 5-person Shooting Team
- Website recognition
- Facebook recognition
- Company name listed on all t-shirts
- Name in thank you advertising after event

_____ In-kind contribution for Raffles/Prizes

Gift Description and Value: _____

_____ Donation

_____ Please invoice (Sponsorship pledge only)

Questions, please call Tracy Landeis: 307-763-0207
or email: tmlandeis78@gmail.com

Contributions to benefit Sheridan Memorial Hospital Foundation's Patient Comfort Care at the Welch Cancer Center.