



La Habra Girls Softball Association

“Where Fast-Pitch Dreams Come True”

Sponsorship Team Redemption Form

Team Name: _____

Team Number: _____ Division: _____

Redemption Amount: \$ _____

Payable to _____

Description of Redemption: _____

Player's Name	Parent/Guardian Signature	Participating (Yes/No)
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		
13.		
14.		
15.		

For more information about our league, please visit us at www.lhgsa.com