JUPITER ELITE

2026–2027 SPONSORSHIP COMMITMENT FORM

Thank you for supporting Jupiter Elite and helping provide opportunities for our athletes to grow, compete, and succeed.

SPONSOR INFORMATION

Contact Person: _____

Company Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone #: _____

E-Mail: _____

Your business tags on Facebook and IG: _____

I WISH TO SPONSOR AT THE FOLLOWING LEVEL:

☐ **GOLD SPONSOR** — $1,000 ★★★

☐ **SILVER SPONSOR** — $500 ★★★

☐ **BRONZE SPONSOR** — $250 ★★★

☐ **FRIENDS OF JVC** — *Custom Donation Amount*

$ _____

TOTAL SPONSORSHIP AMOUNT: $ _____

PAYMENT INFORMATION

Please make checks payable to:

JTAA

Mail Payment To:
401 Caravelle Drive
Jupiter, FL 33458

TAX ID #: 80-1319038

LOGO SUBMISSION

Please email all logos to:

jupiterelite@jtaa.org

Please submit logos in a high-resolution format (PNG, JPG, PDF, AI, or EPS preferred).

AUTHORIZED SIGNATURE

I understand that my sponsorship supports Jupiter Elite and its programs during the 2026–2027 season.

Signature: _____

Date: _____

"DEVELOPING QUALITY ELITE PLAYERS THROUGH HARD WORK AND DEDICATION"

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jupitervb.com

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@jupiterelitevolleyballclub
Instagram & Facebook

SUPPORTING ATHLETES ★ BUILDING LEADERS ★ STRENGTHENING OUR COMMUNITY