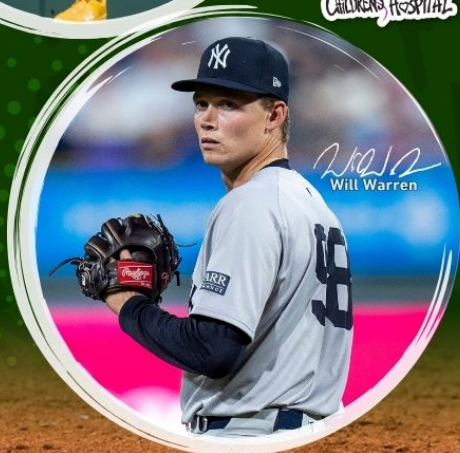
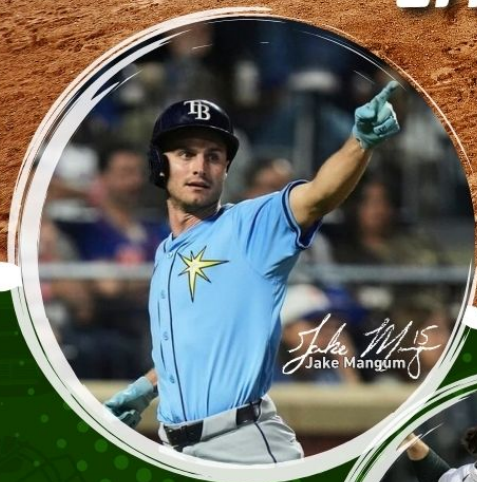




train with the PROS



TUESDAY, NOVEMBER 25
ALL SKILLS CAMP \$110
9:00 AM - 12:00 PM (AGES 6-12)
Pitching, hitting, and fielding skill work
from top pro and collegiate players:

- Will Warren (Yankees)
- Walker Hooks (Ole Miss)
- Reed Trimble (Orioles)
- Konnor Griffin (Pirates)
- Kamren James (Tampa Bay Rays)
- JT Ginn (Athletics)
- Jake Mangum (Tampa Bay Rays)
- Banks Tolley (Frontier League)

BENEFITING
FRIENDS OF CHILDREN'S HOSPITAL &
LITTLE LIGHT HOUSE OF CENTRAL MS





BECOME A SPONSOR

PRICING & PACKAGE OPTIONS

Benefiting
Friends of Children's Hospital &
Little Light House of Central MS



Cage Sponsor	✓ 3 x 5 Banner	\$1,500
Marketing TV's (Company spots allowed)	✓ 4 TV's Ad looped every five minutes	\$1,750
Indoor Turf Field	✓ 4 x 8 Banner	\$2,000
Multi-Purpose Court	✓ 4 x 8 Banner	\$2,000
Pool Area	✓ 4 x 8 Banner	\$2,000
Pitching Lab	✓ 4 x 6 Banner	\$2,500
Banner & Marketing TV's	✓ Banner & TV Spot	\$3,500
Facility Wide Package (Excludes pitching lab)	✓ Arena, Multi-Purpose Court, Pool, and TV's	\$5,000

SPONSOR BENEFITS

- **Year-long sponsorship**
- **Brand Visibility:** Continuous exposure throughout the day to a wide-ranging and active audience.
- **Targeted Reach:** Access to specific demographic segments including athletes, families, health-conscious adults, and youth sports communities.
- **Flexible Creative Options:** Ability to update or rotate ad creatives throughout the sponsorship period.

SPONSOR COMMITMENT FORM



Email completed form to info@grit-ms.com,
or mail to: **GRIT Fitness & Training**
2625 Courthouse Circle
Flowood, MS 39232

SPONSOR INFORMATION

Sponsor _____
Contact Person _____
Address _____
City, State, Zip _____
Phone Number _____
Email Address _____

PACKAGE

- | | |
|--|--|
| ☐ Cage Sponsor | ☐ Pool Area |
| ☐ Marketing TV's | ☐ Pitching Lab |
| ☐ Indoor Turf Field | ☐ Banner & Marketing TV's |
| ☐ Multi-Purpose Court | ☐ Facility Wide Package |

PAYMENT INFORMATION

- | | |
|---|--------------------------------|
| ☐ Credit Card | Name on Card _____ |
| ☐ Send Invoice | Card Number _____ |
| ☐ Check Enclosed | Exp. Date _____ CVV Code _____ |