

CONTACT INFORMATION

Business/Company Name			
Owner/Manager First & Last Name		Owner/Manager Phone Number	
Preferred Contact Person – First & Last Name		Preferred Contact Person Phone Number	
Preferred E-mail			
Business/Company Address		City/State ach Player	Zip Parent
Parkview Contact Name -Banner Sold By	————	ner:	
PAYMENT OPTIONS			
Tennis Court Business Banner - \$350	General Tenr	nis Donation:	_
Check (made payable to PBS-Tennis)	Credit Card –	<u>Click here</u> to pay o	nline or complete below
Credit Card Number (Accepted Cards – Ma	sterCard Visa Disco	ver American Expr	ess)
Name as it appears on card	Exp. Date	Billing Zip Code	Security Code – 3 or 4 digits

SIGN ARTWORK REQUIREMENTS

48" H by 96" W, color artwork/logo – high-resolution, EPS preferred

Kindly submit by Friday, March 1, 2024

Questions? Contact Kelly Phillpott, Director of Development, at 225-235-1611 or giving@parkviewbaptist.com.