



Dan Jordan Memorial Charity Tournament Sponsor Form

Tournament Date's November 30th. through December 2nd. 2018

Clairion Suiters & Conference Center: 17 Gateway Blvd. E., Savannah GA. 31419-9745

Name of Sponsor: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact Person: _____

Phone/Fax #: _____ Cell #: _____

_____ :\$25 Sponsor name listed on the flier

_____ :\$50 Sponsor name listed under dartboard at the event and on the flier.

_____ :\$100 Receive a dartboard, sponsor name listed under dartboard at the event and on the flier.

Please make checks payable to SADA (Savannah Area Darting Association)

For additional information contact: Kevin Arnold 912-661-3376

Receive From: _____

Amount Of: _____

Received by: _____

