

Sponsorship Form

Name of Company or individual(s) (please print)

Sponsorship Contact Name

Address

City

State

Zip

Home Phone

Business Phone

E-Mail

Please check one of the following about your payment:

- ☐ Send Invoice
☐ Check Enclosed

Payable to: Little Rock Open Professional Tennis Foundation

Send this form back to us in one of the following ways:

Mall to: **Little Rock Open Professional Tennis Foundation**
PO Box 8910
Little Rock, AR 72219

Email to jmheflin1970@gmail.com

For more information please call 501-772-2846 or 501-772-2847

2025 Sponsorship Opportunities

| ✓ Sponsor Level | Amount | # Available |
|----------------------------|-----------|-------------|
| Presenting Sponsor | \$ 50,000 | 1 |
| Corporate Sponsor | \$ 30,000 | 2 |
| Accommodations Sponsor | \$ 25,000 | 1 |
| Admissions Sponsor | \$ 20,000 | 1 |
| Stadium Court Sponsor | \$ 15,000 | 1 |
| Court 13 Sponsor | \$ 12,500 | 1 |
| Court 1 Sponsor | \$ 10,000 | 1 |
| Sponsor Tent | \$ 10,000 | 1 |
| Restroom | \$ 7,500 | 1 |
| Ball Crew Sponsor | \$ 5,000 | 2 |
| Finals Match | \$ 5,000 | 1 |
| First Aid & Safety Sponsor | \$ 5,000 | 1 |
| Hydration Sponsor | \$ 5,000 | 1 |
| International/Family Day | \$ 5,000 | 1 |
| Kids' Day | \$ 5,000 | 1 |
| Scoreboard Sponsor | \$ 5,000 | 1 |
| Semifinals Matches | \$ 5,000 | 2 |
| Tournament Store | \$ 5,000 | 1 |
| Transportation | \$ 5,000 | 1 |
| Volunteer | \$ 5,000 | 2 |
| Wildcard | \$ 5,000 | 1 |
| Food/Nutrition Sponsor | \$ 4,000 | 7 |
| Grand Slam Sponsor | \$ 3,000 | Unlimited |
| Hospitality Sponsor | \$ 1,500 | 14 |
| Ace Sponsor | \$ 500 | Unlimited |



Benefitting the Bone Marrow Transplant Program at the UAMS Winthrop P. Rockefeller Cancer Institute.
Visit LittleRockOpen.com for More Information

Thank you for your support!