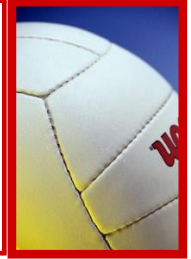


# LSAM State Volleyball Tournament 2017

SPLHS 205 S Main, PO 719 Concordia, MO 64020  
Phone: 660-463-2238 x 231 Fax: 660-463-7621  
E-mail: lsamvolleyball@gmail.com or gloriaburrow@yahoo.com



## LSAM Program Book Advertising Order Form

(Please make additional copies of this form as needed)

**Annual Donations** (please check the level you prefer):

___ Founder's Council	(\$200.00)	Total Amount	_____
___ Partner's Club	(\$100.00)		_____
___ Sustaining Member	(\$50.00)		_____
___ Member	(\$25.00)		_____

Names of person(s) making annual donation:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Tournament Boosters:** (please print the names of each booster; use the back of this form if necessary)

1. _____	4. _____
2. _____	5. _____
3. _____	6. _____

Total Amount Enclosed for Booster Names: \$ \_\_\_\_\_

**Program Booklet Advertising** (All advertisers, both commercial and non-commercial, must supply camera-ready copy of their advertisement. LSAM will not be responsible for designing ads for businesses, groups or teams.)

Name of Advertiser: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

**Type and Size of Advertisement:**

\_\_\_\_\_ Full Page - \$100.00    \_\_\_\_\_ half page - \$50.00    \_\_\_\_\_ quarter page - \$25.00

Amount Enclosed for Advertisement: \$ \_\_\_\_\_

**Ad Copy must be submitted by 2 pm on October 23, 2017**

All State teams are encouraged to submit a full page, including a team photo.

**Please complete this order form and return it with payment to:  
Gloria Burrow, PO 719 Concordia, MO 64020**

*“Humble yourselves in the presence of the Lord, and He will exalt you.”  
James 4:10*