



# 2025 Clarksville National Little League Team Sponsorship Invoice



Mail Checks to:

CNLL

PO BOX 3271

Clarksville, Tn 37043

Make checks payable to CNLL

Business or Sponsor Name: \_\_\_\_\_

Age Division and Team Name: \_\_\_\_\_

1 Fall Team Sponsorship \$150.00

We greatly appreciate your support for our league and are proud to represent your  
business at our parks.