



**100 Inning Baseball Spectacular
to benefit
The ALS Association of Massachusetts**
Scheduled for April 17-18, 2004



Sponsor Name: _____

Company Name (if applicable for donation): _____

Street: _____
(please provide credit card billing address if donating via credit card)

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____

Email: _____
(email will only be used to update you regarding the 100 Inning Baseball Spectacular)

Boston Baseball Member you are cheering for: _____

Supporter Donation- Per Inning
Amount per inning: _____ x 100 innings = \$ _____
(Total innings played per player may vary. Donation is for 100 innings, regardless of actual number played)

Corporate Donation Amount
\$ _____

Donation Details	
_____	Check enclosed (make checks payable to: "The ALS Association Massachusetts Chapter")
_____	Bill to my Credit Card Name on Card: _____
	Billing address if different from above: _____
	Credit Card # _____ Expiration: _____
_____	Mail me a receipt, as this donation is tax-deductible and I will need it for taxes.
<i>Return this form with donation to participant who solicited your sponsorship.</i>	

Donation minus a portion for BMBL expenses goes to Curt's Pitch for ALS (The ALS Association Massachusetts Chapter) and is tax deductible. In the event of rain and cancellation of the event, donations will still be made to Curt's Pitch for ALS.