

WEST TENNESSEE HEALTHCARE SPORTSPLEX SPONSORSHIP AGREEMENT

This Agreement made as of this the ____ day of _____, 20__ (“Effective Date”), is entered into between the City of Jackson, Tennessee (“City”) and _____ (“Sponsor”), to support the development, construction, operation, and maintenance of the West Tennessee Healthcare Sportsplex, a multi-field baseball/softball complex located in Jackson, Madison County, Tennessee:

- 1. Purpose of Agreement. The purpose of this Agreement is to describe the nature and scope of the sponsorship activities and the level of financial support to be provided to the City by the Sponsor for the development, construction, operation, and maintenance of the West Tennessee Healthcare Sportsplex, and to contractually bind the parties to the same terms herein.
2. Sponsorship Levels, Term, and Fees. In consideration of the benefits afforded the Sponsor herein, the Sponsor agrees to financially support the West Tennessee Healthcare Sportsplex on the terms as indicated below (CHECK ONE):

- \$250,000: Sponsor is entitled to the benefits of the sponsorship of one of the following: a pod of fields (one of the 4 complexes) for a 10-year term.
\$100,000: Sponsor is entitled to the benefits of the sponsorship of one of the following: the playground area; a pavilion; or the maintenance building, for a 5-year term.
\$50,000: Sponsor is entitled to the benefits of having its name displayed on (1) signage at all complex pods for a 5-year term, AND (2) 1 outfield sign in each of the 17 fields for a 5-year term; OR, sponsorship of an individual ball field for a 7-year term.
\$25,000: Sponsor is entitled to the benefits of having its name displayed on (1) signage at all complex pods for a 5-year term, OR (2) 1 outfield sign in each of the 17 fields for a 5-year term.
\$12,000: Sponsor is entitled to the benefits of having its name displayed on: any of the scoreboard backs on Fields #1, #5, or #6; the sides of the D Complex gift shop; or the BancorpSouth Parkway tunnel entrance, for a 4-year term (\$3,000 per sign per year).
\$4,000-\$8,000: Sponsor is entitled to the benefits of having its name displayed on: any of the scoreboard backs on Fields #12, #13, or #16 (\$2,000 for each sign); any of the scoreboard backs for Fields #3, #4, #7, #8, or #9 (\$1,500 for each sign); or the right front panel of any available scoreboard (\$1,000 for each sign), for a 4-year term.
\$1,500: Sponsor is entitled to the benefits of having: (1) its name displayed on an outfield sign on one or several fields, OR (2) a website link on Sportsplex website, for a 3-year term. (Each sign or web link is \$500 per year.)
OTHER: Sponsor is entitled to a unique, “out of the box” sponsorship valued at \$_____ for a _____-year term, negotiated individually with a City Sportsplex, terms outlined in (4) below.
Tournament Sponsor _____ Qualifier (\$3,000) _____ Specialty (\$5,000: State, World Series, Global Series, V Foundation Challenge, Boys of Summer Championships)
Sponsor is entitled to benefits outlined in the Tournament Sponsorship Opportunities attached.

3. Sponsorship Consideration/Terms of Payment. The consideration due from the Sponsor shall be in the amount of \$_____, payable in _____ installment(s) commencing _____, 200__, and, if payable in more than one installment, then due on _____ annually thereafter. Checks should be made payable to the “City of Jackson” and sent directly to: West Tennessee Healthcare Sportsplex, 250 BancorpSouth Parkway, Jackson, TN 38305.

4. Covenants of the City. Funds received from the Sponsor pursuant to this Agreement shall be expended for: (a) the operation and/or maintenance of the West Tennessee Healthcare Sportsplex at the discretion of the City; or (b) sponsorship of a specific aspect of the West Tennessee Healthcare Sportsplex as specified below:

5. Force Majeure. The City shall not be responsible to the Sponsor for failure to perform any of the obligations imposed by this Agreement if such failure is occasioned by fire, flood, explosion, lightning, windstorm, earthquake, or other act of God that is beyond the reasonable control of the City.

6. Assignment. This Agreement shall be binding upon the successors of the Sponsor, and shall not be assignable by either party without the prior written consent of the other party.

7. Governing Law. The validity and interpretation of this Agreement shall be governed by Tennessee law.

8. Entire Agreement. This Agreement embodies the entire understanding between the parties with respect to the sponsorship contemplated herein and supersedes any prior or contemporaneous representations, either written or oral. No amendments or changes to this Agreement shall be effective unless made in writing and signed by the authorized representatives of the parties.

IN WITNESS WHEREOF, the parties hereto have caused this Agreement to be executed by their duly authorized representatives, effective as of the day and year first written above:

SPONSOR
By: _____
Title: _____
Address: _____
City, State, & Zip: _____
Phone: (_____) _____
Email: _____
Link if applicable: _____

CITY OF JACKSON, TENNESSEE
By: _____
Title: _____
West TN Healthcare Sportsplex
250 BancorpSouth Parkway, Jackson, TN 38305
(800)941-2415 (731)425-8640 Fax (731)422-7071
Website: www.jacksonsportsplex.com
Email: sportsplex@cityofjackson.net

(Sponsor: Please e-mail link & logo to the Sportsplex e-mail address.)