



AFRO AM BASKETBALL ASSOCIATION

PARTNERSHIP & SPONSORSHIP SUBMISSION FORM

"Building Opportunity. Developing Talent. Transforming Communities Through Basketball."

Thank you for your interest in partnering with the AFRO AM Basketball Association. Our mission is to create sustainable opportunities for athletes, communities, businesses, and organizations through professional basketball, strategic player development, education, and deep-rooted community engagement. Please complete the comprehensive fields below so our executive leadership team can analyze and properly evaluate your proposed partnership alignment.

SECTION 1: ORGANIZATION INFORMATION

Organization

Name: _____

Business / Organization Type:

- | | | |
|---|---|--|
| ☐ Corporate Sponsor | ☐ Nonprofit Organization | ☐ Investor Group |
| ☐ Community Organization | ☐ Sports Organization | ☐ Educational Institution |
| ☐ Government Agency | ☐ Media Partner | ☐ Other: _____ |

Website / URL: _____

Primary
Contact:

Title: _____

Email Address: _____

Phone: _____

Business
Address: _____

City: _____

State/Province: _____

Country: _____

SECTION 2: PARTNERSHIP INTEREST

Select all areas of commercial or programmatic alignment your organization is interested in exploring:

- | | |
|---|---|
| ☐ Corporate Sponsorship | ☐ Athlete Development Programs |
| ☐ Team Ownership Opportunities | ☐ NIL & Brand Partnerships |
| ☐ Event Sponsorship & Activation | ☐ Media, Production & Broadcasting |
| ☐ Youth Development Programs | ☐ Basketball Camps & Clinics |
| ☐ Community Outreach Programs | ☐ International Basketball Development |
| ☐ Facility & Venue Partnership | ☐ Education & Scholarship Programs |
| ☐ Investment Frameworks | ☐ Other: _____ |

SECTION 3: PARTNERSHIP GOALS

1. Please describe your organization's core strategic goals for seeking a partnership with AFRO AM:

2. What explicit operational, commercial, or structural outcomes would you like to achieve?

SECTION 4: RESOURCES & CONTRIBUTIONS

Identify assets, capabilities, or provisions your organization proposes to contribute to the alliance:

- | | | |
|---|--|--|
| ☐ Financial Sponsorship | ☐ Transportation Assets | ☐ Volunteer Staffing |
| ☐ Marketing & PR Support | ☐ Housing Accommodations | ☐ Professional Services |
| ☐ Facilities / Venues | ☐ Food & Beverage Support | ☐ Educational Resources |
| ☐ Equipment / Apparel | ☐ Media & Press Coverage | ☐ Technology / IT Support |

Estimated Tier or Annual Partnership Value:

- | | | |
|---|---|--|
| ☐ Under \$5,000 | ☐ \$25,001 - \$50,000 | ☐ \$100,001 - \$250,000 |
| ☐ \$5,000 - \$25,000 | ☐ \$50,001 - \$100,000 | ☐ \$250,001 + |

SECTION 5: COMMUNITY IMPACT

Detail how your current organizational ecosystem supports community development, youth empowerment, healthcare, wellness, or existing sports development initiatives:

SECTION 6: PARTNERSHIP TIMELINE

Target Commencement

Date:

Preferred Terms / Duration:

- | | | | | |
|---|-----------------------------------|---------------------------------|--|--|
| ☐ Event-Based Only | ☐ 6 Months | ☐ 1 Year | ☐ Multi-Year Term | ☐ Long-Term Strategic |
|---|-----------------------------------|---------------------------------|--|--|

SECTION 7: ADDITIONAL INFORMATION

Provide supplementary context, historical metrics, or operational data relevant to the assessment of this request:

AUTHORIZATION & AGREEMENT

By affixing signatures below, the applicant certifies that all corporate data, financial valuations, and operational capabilities specified across this document are entirely accurate, genuine, and authorized by governing corporate boards.

AUTHORIZED APPLICANT SIGNATURE

PRINT NAME & TITLE

DATE

AFRO AM EXECUTIVE INTERNAL REVIEW ONLY

Date
Received:

Reviewed By:

Partnership
Category:

Executive
Status:

☐ Approved ☐ Pending ☐ Declined

Executive Board Comments / Operational Provisos:

EXECUTIVE OFFICER APPROVAL SIGNATURE

DATE

AFRO AM Executive Board: Jenaya Parker (President) • Javan Smith (Director of Operations) • Justin Allen (CFO / VP)