

Naming Rights Application for Amenity

Name of Individual/Organization Group (DBA): _____

Organization Address: _____

City: _____ State: _____ Zip: _____

Contact Person First Name: _____

Contact Person Last Name: _____

Contact Phone Number: _____

E-mail: _____

Amenity Interested in Naming Rights for: _____

What level of investment would you be willing to consider for this opportunity?

Check One: 5 Years 10 Years 15 Years 20 Years

Proposed Name/Title: _____

Thank you for taking the time to fill out this application.

Please email your application to:

askparks.lue@sdcounty.ca.gov

Mail your application to:

County of San Diego Parks and Recreation Department

Director's Office

5500 Overland Avenue, Suite 410

San Diego, CA 92123

