

EQUIPMENT SALE PROGRAM

1. League: _____

2. Type of Equipment: _____

3. Description of Equipment: _____

4. Quantity Available: _____

5. Price Requested per Item: _____

(If no charge for equipment state "No Charge")

6. League Contact: _____

7. Contact Phone Number: _____

8. Location to Pick-up Equipment: _____

9. Date Available: _____

(PLEASE PROVIDE PICTURES OF EQUIPMENT IF AVAILABLE)