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

PARKS AND RECREATION
COUNTY OF SAN DIEGO