



we run orange county's kids

2017-2018 RUNNER SIGN UP FORM

RUNNER INFO

Name (First/Last): _____ Grade: _____ DOB: _____ Gender: _____

Address: _____

Home Phone: _____ Runner's Cell: _____

Optional information that provides program statistics Runner Ethnicity: _____

Runner Shirt Size (complete all):

If youth size available _____ If unisex adult size available _____ If women size available _____

Primary Contact Name: _____ **Cell:** _____

Email Address: _____

Secondary Contact Name: _____ **Cell:** _____

Email Address: _____

Other Emergency Contact #1: _____

Other Emergency Contact #2: _____

Doctor's Name: _____ **Doctor's Phone:** _____

Health Insurance: _____ Insurance ID Number: _____

Allergies or known medical conditions: _____

Volunteers NEEDED:

- _____ I am able to run/bike with the students Circle: Mon Tues Thurs
- _____ I am able to help at after school practice (no running/biking) Circle: Mon Tues Thurs
- _____ Recycle Parent (collects all recycling and turns it in, monthly, for cash)
- _____ Water Station Coordinator (organizes and coordinates water station for OC Marathon)
- _____ Transportation Coordinator (works with team to arrange carpools to various events)
- _____ Apparel Coordinator (sorts orders, collects money, delivers apparel)
- _____ Food Coordinator (organizes snacks and food for various special events)
- _____ Aid Station Coordinator (organizes and coordinates weekend aid station schedule and supplies)