



**2012-2013 Runner's Sign Up Form**

**Runner's Name:** \_\_\_\_\_ **Grade:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **Runner's Cell:** \_\_\_\_\_

*\*Optional info that provides program statistics* **Runner's Ethnicity:** \_\_\_\_\_

**Mom's Name:** \_\_\_\_\_ **Mom's Cell:** \_\_\_\_\_

**Mom's E-mail Address:** \_\_\_\_\_

**Dad's Name:** \_\_\_\_\_ **Dad's Cell:** \_\_\_\_\_

**Dad's E-mail 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:** \_\_\_\_\_

**Runner's T-shirt Size:**                      **Adult Small**                      **Adult Medium**                      **Adult Large**                      **Adult X-Large**

**Volunteers NEEDED:**

\_\_\_\_\_ I am able to run/bike with the students after school                      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)