



KIDS 5TH ANNUAL DIAMOND RUN SPONSORSHIP FORM

Be sure to turn in your sponsor form by **APRIL 14, 2017**

NAME OF RUNNER: _____

SCHOOL: _____

SPONSOR NAME	TOTAL AMOUNT COLLECTED	PAID	SPONSOR NAME	TOTAL AMOUNT COLLECTED	PAID
SAMPLE	\$10.00	X	13.		
1.			14.		
2.			15.		
3.			16.		
4.			17.		
5.			18.		
6.			19.		
7.			20.		
8.			21.		
9.			22.		
10.			23.		
11.			24.		
12.			25.		



THANK YOU FOR YOUR PARTICIPATION!

Please make checks payable to Oak Clinic.

TOTAL

TICKET & T-SHIRT ORDER FORM

Name _____

Address _____

City _____ State _____

Zip _____ Phone (_____) _____ - _____

FREE TICKET FOR PARTICIPATION

FREE T-SHIRT (FREE WITH \$35 IN SPONSORSHIPS)

Child-S Child-M Child-L Adult-S Adult-M Adult-L

TICKETS CAN BE PURCHASED FOR \$8 EACH:

Additional # of Tickets _____ x \$8 EA= _____

T-SHIRTS CAN BE PURCHASED FOR \$10 EACH

Adult Sizes

Small X Medium X Large X

X-Large X 2X-Large X 3X-Large X

Child Sizes

Small X Medium X Large X

Additional # of T-Shirts _____ x \$10 EA= _____

TOTAL ENCLOSED FOR TICKETS & SHIRTS:

FOR BEST SELECTION, ORDER EARLY

