



Family Sponsorship Form
15th Annual Miles for Smiles 5K Run / Walk
Benefiting Trinity Early Learning Center – April 14, 2018

Family Name: _____

Contact Name: _____

Email: _____

Address: _____

Phone: _____

We would like to participate at the _____ SPONSORSHIP LEVEL or circle below:

If you do not want to participate in the race just put n/a where the registrant name is listed. If you are participating in the race your race number will be picked up the morning of the race.

FAMILY GOLD SPONSOR: \$200

- **2 Adult Race Registrations and t-shirts**
 - Adult Registrant Name: _____ Age: _____ T-shirt Size: _____
 - Adult Registrant Name: _____ Age: _____ T-shirt Size: _____
- **1 Fun Run/Tot Trot Registration and t-shirt**
 - Child Registrant Name: _____ Age: _____ T-shirt Size: _____

FAMILY SILVER SPONSOR: \$150

- **1 Adult Race Registration and t-shirt**
 - Adult Registrant Name: _____ Age: _____ T-shirt Size: _____
- **1 Fun Run/Tot Trot Registration and t-shirt**
 - Child Registrant Name: _____ Age: _____ T-shirt Size: _____

FAMILY BRONZE SPONSOR: \$100

- **1 Adult Race Registration and t-shirt**
 - Adult Registrant Name: _____ Age: _____ T-shirt Size: _____

All race registrations will be available for pick-up on race day.

PAYMENT (circle)

- Check enclosed made payable to **Trinity Early Learning Center Miles for Smiles**. Drop off in the box on Lucille's Desk in the front lobby.
- Go the following link to donate online:
<https://raceroster.com/events/2017/11872/miles-for-smiles-5k>
- Please complete credit card information below:

Visa/MC/Amex

Number: _____ Exp Date: _____ CVC: _____

Name on Card: _____

Billing Address: _____

SIGNATURE: _____ **DATE:** _____