



Gameball Run T-shirt Order Form

Cost - \$10 cash or check payable to Children's Hospital of Illinois

Orders and payment due to MJHS Office by Monday, Jan 28

All shirts will be distributed to students at school prior to Feb 15

Students are encouraged to wear shirts to school on Friday, Feb 15 and anyone wearing the shirt to the MHS Gameball Run basketball game that night will receive free admission.

**** See other side for Gameball Run Runner registration ****

Student Name: _____

Parent Name: _____

Contact Number: _____

Adult S Qty: ____	Adult M Qty: ____	Adult L Qty: ____	Adult XL Qty: ____	Adult XXL Qty: ____
Youth S Qty: ____	Youth M Qty: ____	Youth L Qty: ____	Youth XL Qty: ____	

Total # of shirts ordered: _____

Total amount paid: \$ _____

Cash

Check # _____

(payable to: Children's Hospital Of Illinois)



GameBall Run Runner Registration

(only to be completed if student intends to donate \$25 and Run)

The Gameball RUN will be held on February 14 at 4pm on the MHS Athletic Field (weather permitting)

The run will include the MHS Basketball teams, District 709 administration and faculty members, our Miracle Families and any student (K-12) willing to donate \$25 to participate

There will be music, fun, concessions and our guests to cheer on the runners and families - this is a free event for spectators.

Runner Registration \$25 cash or check payable to Children's Hospital of Illinois

Registration includes Gameball run t-shirt, runner's bib, and 2 tokens for free popcorn at the Gameball RUN on February 14 and/or Gameball GAME on February 15.

If the Run is cancelled due to weather, MJHS runners will meet in the MHS gym.

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Runner name: _____ Grade: _____

Runner name: _____ Grade: _____

Runner T-shirt (included with \$25 donation)

Adult S Qty: _____	Adult M Qty: _____	Adult L Qty: _____	Adult XL Qty: _____	Adult XXL Qty: _____
Youth S Qty: _____	Youth M Qty: _____	Youth L Qty: _____	Youth XL Qty: _____	

Total amount paid: \$ _____ Cash Check # _____ (payable to Children's Hospital of Illinois)

Waiver Release for Gameball Run Runner Participation

I know that running a race is a potentially hazardous activity. I know that I should not enter and run unless I am medically able and properly trained. I agree to abide by any decision of a race official relative to my ability to safely complete the run. I assume all risks associated with running this event. I also understand that the race may be canceled because of inclement weather and I am not entitled to a refund. Having read this waiver and knowing these facts and in consideration of your accepting my entry, I, for myself and anyone entitled to act on my behalf, waive and release the city of Morton, Morton School District 709, Children's Hospital of Illinois, Shazam Racing, Running Central and all other sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in this event. I grant permission to all of the foregoing to use any photographs, motion pictures, recordings, or any other record of this event of any legitimate purpose.

Signature _____ Guardian (if under 18) _____