



Please complete application (Please use a pen and press firmly):

Date _____ Running Shoe size _____

Toddler Male
 Child Female
 Adult (Circle All That Apply)

Name of Student _____

Address _____

Home Number _____ Cell _____ **Parent Name** _____

School _____ Grade Level _____ **Parent Signature** _____

*By signing this form, you consent to any photographs of your child receiving shoes possibly being used for promotional purposes by *The Angel Fund, Running For Montana's Future*, and/or *Helena Police Department*. To opt out, check the box below.

I opt out to having my child's photographs used by *Angel Fund, Running For Montana's Future*, and/or *Helena Police Department* for promotional purposes.

Justification for Request _____
 (To be completed by School Representative or SRO)

School Representative's Name/Position _____

- Student: Please **TURN APPLICATION INTO** Front Desk after it is **signed by your parent/guardian**.
- **Running shoes will be purchased and delivered to the student.**

-----FOR OFFICIAL USE ONLY-----
 The Angel Fund and Running for Montana's Future support the youth of Helena by providing running shoes for students in need.

Merchant: _____ Total: \$ _____