



## JUNIOR PARTNERS IN TRAINING MERCEDDES MARATHON REGISTRATION FORM

JUNIOR Partners In Training (PIT) is an initiative of The Service Guild of Birmingham designed to engage school children ages 11 and up to train and raise money for the children of The Bell Center Early Intervention Program. The goal is to couple a healthy, active lifestyle with a passion for work within the community. The Service Guild Chair will gladly sign off on required school service commitment hours dedicated to the participant's training and fundraising.

Name:

Current address:

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Parent's Work #: \_\_\_\_\_

Sex: Female \_\_\_\_\_ Male \_\_\_\_\_ Age on Race Day: \_\_\_\_\_ DOB: \_\_\_\_\_

Email: \_\_\_\_\_ Parent's Email: \_\_\_\_\_

School: \_\_\_\_\_ Grade \_\_\_\_\_

**EMERGENCY CONTACT/RELATION:**

Cell Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Medical Insurance Company:

Insurance Contract &/or Group Number:

Shirt Size (Adult Size) Small \_\_\_\_\_ Medium \_\_\_\_\_ Large \_\_\_\_\_ X Large \_\_\_\_\_ XX Large \_\_\_\_\_

The JUNIOR PIT can select the BE5K or the Mercedes Marathon 5 person relay based on athletic training and conditioning. Each participant will be paired with a past or present Bell Center child and the student will train and raise funds in the name of that child. It is an amazing, life changing experience to dedicate hours of training and focus for a child at risk for developmental delay.

I will participate in BE&K 5K RUN \_\_\_\_\_ MM Relay \_\_\_\_\_

Name of Relay Team: \_\_\_\_\_ Team Captain \_\_\_\_\_

Member #2 \_\_\_\_\_ Member#3 \_\_\_\_\_

Member #4 \_\_\_\_\_ Member#5 \_\_\_\_\_

As a Partner In Training I agree to raise a minimum of \$310 in honor of the child assigned/requested. I understand that I will be training and participating in the name of honored child attending The Bell Center who will be selected for me unless a past or present Bell Center child is requested.

Bell Center Child's Name Requested:

Signature of applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Parent/Guardian \_\_\_\_\_ Date: \_\_\_\_\_

**Application fee of \$50 payable to The Bell Center must accompany application**

The Bell Center  
Attention: Maureen Farr  
1700 29<sup>th</sup> Court South Homewood, AL 35209