



SAMPLE

PLEASE COMPLETE APPLICATION (Please use a pen and press firmly):

Date _____

Running Shoe size _____

Male / Female (Circle one)

Name of Student _____

Address _____

Home Number _____ Cell _____

Parent Name _____

School _____ Grade Level _____

Parent Signature _____

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.

Name of Student: _____ School: _____

Merchant: _____ Total: _____ **Date Application received:** _____

Check#: _____