

Dear Parent/Guardian,

Your son or daughter has showed an interest in participating in an upcoming 5-kilometer (3.1 miles) *Jingle Bell Run/Walk for Arthritis* road race. The run/walk race will be held in **Freeport on Sunday, December 7th**. Students have been asked to train three times per week for the Jingle Bell 5k Event!

To participate in the event, students need to bring back the following **on or before November 3rd, 2014**:

- Permission Slip
- Donation/Registration Form & \$30 registration fee- Students need to raise a minimum of \$30 to cover their entry fee. The entry fee does include a t-shirt, so please include the size you would like on the registration form. Checks can be made out to the: **Arthritis Foundation**

On the day of the Jingle Bell Run, **the bus will leave from MVMS at 7:15 AM**, as the **race starts promptly at 10 AM**. We should be finished running around 11 AM. Students will be given a short amount of time with a chaperone to check out a store of their assigned group's choice and possibly visit Dairy Queen, if they want to buy an ice cream in Freeport. Students may bring spending money, but it is not necessary. The bus is scheduled to **arrive back at MVMS at approximately 1:30 PM**. If we are running early or late, we will contact you at the phone number you leave below. Please be at the school promptly at 1:30 to pick up your child.

Students should plan to bring a bagged lunch for the ride home.

Proper dress is very important when running/walking the race:

- **SOCKS AND SHOES** - Wear socks and comfortable athletic shoes that fit. Proper socks will help prevent blisters.
- **CLOTHING** - Running when you are too hot or too cold does not lead to an enjoyable running experience. We suggest wearing layers so the proper adjustments can be made during the race. Shorts, T-shirts, sweatpants and sweatshirts are all acceptable. Please discourage your child from wearing jeans.
- **WATER**- Bring your own water bottle. It's important to stay hydrated.

Thank you for your support in helping your child achieve one of his/her goals. Please contact one of us with any questions.

Sincerely,

Erica Grimaldi
Health Teacher
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Lora Glover
Meroby Ed. Tech
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PERMISSION SLIP

I give my son/daughter _____ permission to ride the bus to Freeport on Sunday, December 7th to participate in the Jingle Bell 5K race. **My son/daughter will run at his/her own pace & once he/she crosses the finish line he/she will meet up with the group at the designated meeting point.**

Age: _____ T-Shirt Size: _____

_____ I plan on coming to cheer on my son/daughter & will be bringing my son/daughter home after the race.

_____ I allow my son/daughter to participate in the race & shop for a ½ hour or so in Freeport after the race. I will pick up my son/daughter at 1:30 at MVMS.

_____ I, _____ (parent/guardian), have raised an additional \$30 to participate in the Jingle Bell 5k Run/Walk in Freeport along with my son/daughter.

Phone Number of Parent/Guardian _____
(Where you can be reached, the day of the race)

Does your son/daughter have any medical needs that I should be reminded of? YES NO
If yes, please explain.

Parent/Guardian Signature _____ Date _____