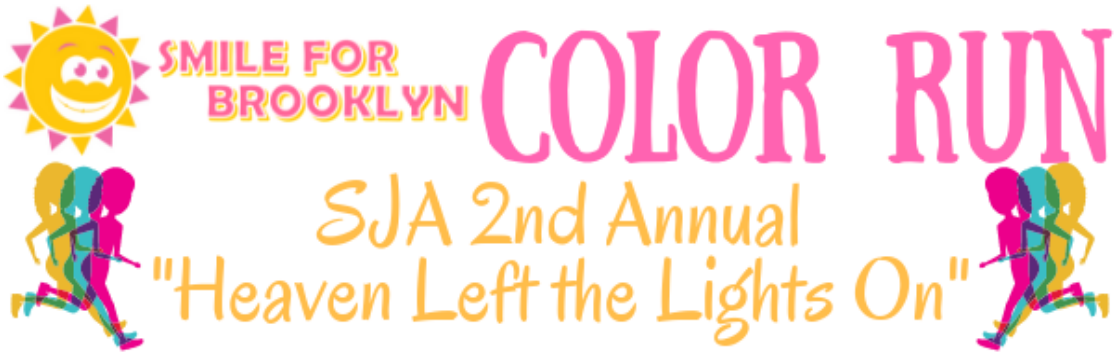

Registration Fee: $20.00 Per Person

Runner's Name: _____

Phone/Email: _____

Shirt QTY: Adult:_____Child:_____Shirt Size: SM M LG XL

☐ I am going to run in the color run.
☐ I will not be able to run/attend but please accept my donation.

On May 8th, 2019, I will be participating in the SJA Smile for Brooklyn "Heaven Left the Lights On" color run. The funds collected will go to SJA Brooklyn Smith Scholarship Fund and the SFB "Heaven Left the Lights On" program. I hope you can help by pledging any amount to our cause.

Pledge Name	Phone/Email	Pledge Donation	Total Amount

Registration Fee: _____

Amount in Pledges: _____

Total Amount: _____

Please collect pledges in advance and bring all collections to Michelle Jones by Friday May 3rd, 2019.

Make checks payable to: SJA Memo: Brooklyn Smith