



Dear Teachers and Parents,

To register your student as a Miracle Match KID, please complete this form and return with the appropriate registration fee to the address below. Registrations may also be done online by going to <https://runsignup.com/Race/TX/Waco/MiracleMatchMarathon>

**STUDENT REGISTRATION:** (One form per student - includes a commemorative, race bib and finisher medal)

School: \_\_\_\_\_ PE Teacher or MMK coordinator's name: \_\_\_\_\_

Student's Name: \_\_\_\_\_

(Please print clearly)

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_ Age \_\_\_\_\_  Male  Female

**TEACHER/PARENT SUPPORTER MMK REGISTRATION** (includes MMK bib and commemorative)

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_ Age \_\_\_\_\_  Male  Female

Note: T-shirts will not be given this year, but every entry will receive a Miracle Match KIDS commemorative.

**Fees:**

Miracle Match Kids Student Registration Fee: (\$12).....\$ \_\_\_\_\_

MMK Teacher/Parent Registration Fee: (\$15).....\$ \_\_\_\_\_

Total Enclosed: \$ \_\_\_\_\_

**Waiver:**

I, the undersigned, assume full and complete responsibility for any injury or accident, which may occur during my child's participation in this event. I hereby release and hold harmless Miracle Match KIDS, Baylor Scott & White Healthcare, City of Waco, sponsors, promoters and all other persons and entities associated with this event or their agents, employees or otherwise, including all injuries and damages which were caused by the negligence of the released parties.

Parent's name (printed) \_\_\_\_\_

Parent's Signature \_\_\_\_\_

Give to the school PE teacher or MMK coordinator with the fee. You may also mail this form with fee (checks payable to the Miracle Match KIDS) to:

Miracle Match KIDS  
11210 Whiterock  
Temple, TX 76502