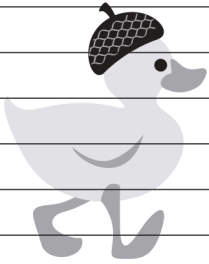
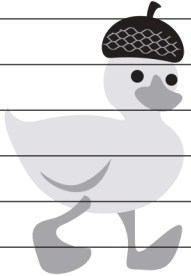
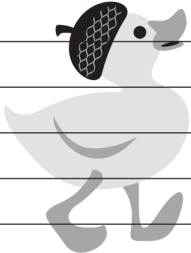
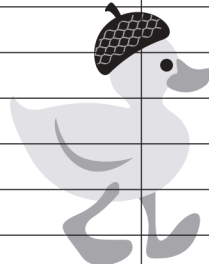


14TH ANNUAL kids diamond run SPONSORSHIP FORM

Raise \$35, you'll get a free t-shirt, a game ticket & a special surprise!

Name of Runner: _____

Sponsor Name		Total Amount Collected	Paid	Sponsor Name		Total Amount Collected	Paid
Sample		\$10.00	X	13.			
1.				14.			
2.				15.			
3.				16.			
4.				17.			
5.				18.			
6.				19.			
7.				20.			
8.				21.			
9.				22.			
10.				23.			
11.				24.			
12.				25.			



Please make checks payable to The Oak Clinic.
Thank you for your participation!

TOTAL

TICKET & T-SHIRT ORDER FORM

Name: _____ Phone: (____) _____

Email: _____

How would you like to pay?

Amount: _____ Check Enclosed
Please make checks payable to The Oak Clinic

Credit Card: Visa MasterCard American Express Discover

Name on Card: _____

Credit Card Number: _____

Expiration: _____ CVS: _____ Billing Zip: _____

T-SHIRTS CAN BE PURCHASED FOR \$15 EACH:

Every participant that raises over \$35 will get a free t-shirt & game ticket!

Adult Sizes

SMALL Qty _____ MEDIUM Qty _____ LARGE Qty _____

X-LARGE Qty _____ 2X-LARGE Qty _____ 3X-LARGE Qty _____

Child Sizes

SMALL Qty _____ MEDIUM Qty _____ LARGE Qty _____

Total # T-SHIRTS _____ X \$15 each = _____

EARNED T-SHIRT (with \$35 sponsorship) Size: _____ **FREE**

TICKETS CAN BE PURCHASED FOR \$10 EACH:

Total # TICKETS _____ X \$10 each = _____

Do you need accessible seating? Yes No

Please return this completed form, along with any sponsorships, to The Oak Clinic by Thursday, April 16, 2026.

MAIL YOUR ORDER FORM TO THE OAK CLINIC:

3838 Massillon Rd., STE 360 · Uniontown, OH 44685 (Please make checks payable to The Oak Clinic)