

# Coyle School Foundation and Alumni Activities—JOIN US!

## October 12, 2024, at Coyle School

If you plan to attend the BBQ Dinner and brief alumni/CSF meeting, please complete the following information and mail with \$10 per adult; \$7 per student per plate.

First Name \_\_\_\_\_ Last Name: \_\_\_\_\_ Grad. Yr. \_\_\_\_\_

First Name \_\_\_\_\_ Last Name: \_\_\_\_\_ Grad. Yr. \_\_\_\_\_

First Name \_\_\_\_\_ Last Name: \_\_\_\_\_ Grad. Yr. \_\_\_\_\_

### Other Upcoming Activities

**Sept. 28, 2024--register by Sept. 14 for a t-shirt for 5K Race or Corn Hole Tournament (see below)**

\_\_\_ Register me for 5K race sponsorship. Please go online to register for 5K race on Sept. 28 Check enclosed for \$\_\_\_\_\_.

\_\_\_ Register me for **the Corn Hole Tournament. Walk-ins are welcome on Corn Hole Tournament.** \$20 per team.

Check enclosed for \$\_\_\_\_\_.

**Oct. 12, 2024**

\_\_\_ Register me for Corn Hole Tournament. \$10 per team. Check enclosed for \$\_\_\_\_\_

\_\_\_ Register me for the Volleyball Tournament. \$60 per team or \$10 per person. Check enclosed for \$\_\_\_\_\_.

\_\_\_ Coyle School Alumni and Community BBQ Dinner and Pie Auction for \$10 per adult or \$7 per student.

Check enclosed for \$\_\_\_\_\_.

Name \_\_\_\_\_ Phone \_\_\_\_\_

Email \_\_\_\_\_ Address \_\_\_\_\_

Sponsor Name for Golf Hole Sponsorship and/or 5K Race Sponsorship \_\_\_\_\_

## Stinger's 5k Spirit Run or Walk

**9 a.m. • Saturday, Sept. 28, 2024 • Coyle School Gym**

Registration form below. For credit card payments register online at <https://go.rallyup.com/5b394c/>

\*\*\*Please mail this form to CSF Stinger Run; PO Box 122, Coyle, OK 73027 or bring to Coyle High School Office\*\*\*

**Registrations received prior to September 14, 2024, will be guaranteed Stinger Spirit Run shirt. Registration begins at 8 a.m. • Please complete one registration form per entry.**

Name: \_\_\_\_\_ Date of Birth (MM/DD/YY): \_\_\_\_\_

Gender: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Shirt Size: \_\_\_\_\_

Emergency Contact Name & Number: \_\_\_\_\_

Please check one of the following for payment:

\$30 for Adults     \$20 for Students     Children 5 & under free with adult.

I am including a check with this form; please make payable to Coyle School Foundation

By signing below I agree to the waiver, found at [coyleschoolfoundation.com](http://coyleschoolfoundation.com). If the runner is a minor, I am signing as their guardian.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Printed Name: \_\_\_\_\_