

## TEAM HALL

### DETAILS:

**Saturday,  
May 15**

**Raccoon  
River  
Valley  
Park,  
West Des  
Moines,  
Iowa**

**Check in:  
10:00a.m.**

**Starts:  
11:00a.m.**

Donations  
made out to  
CFF can be  
mailed to:

TEAM  
HALL  
1412 HyVue  
Street  
Adel, IA  
50003

# Great Strides-CF

APRIL 2010

## Help Cure Cystic Fibrosis

**Greetings from  
TEAM HALL**— it  
has been a very difficult  
health year for our  
family as the boys have  
struggled with multiple  
health concerns.

*Average daily med  
routine;*

30-40 pills

1 hour respiratory  
therapy

Misc. inhalers

Glucose checks

insulin

*Order your shirt today!*

**Always**

**Dreaming 4**

**Miracles**



**Change Drive  
2009**

Alex has had to fight many challenges this year— starting insulin and injecting 3-5 times on average per day. He has been struggling with an infection since shortly after the new year and spent 5 days inpatient around the Easter Holidays, still only making it to school a couple times per week.. We continue to seek answers to his illness.

## Transportation- reserve your seat on the “Cure CF Bus...”

Pick up/Drop off  
Adel 6/7 building

Board bus: 9:30 a.m.  
General return time  
around 1:00 p.m.  
(Lunch provided @  
walk)

Suggested donation  
of \$10 to CF for your  
bus ride

Students up thru 3rd  
grade need 1 adult to 6  
ration; Students 4th-6th  
grade need 1 adult to 8  
ratio; 7th grade & up can  
attend alone

### RESERVATIONS:

Call: 515.993.7310  
Text: 515.231.3918  
michelle@michelleroling.com

**SIGN UP  
WITH A  
FRIEND!**

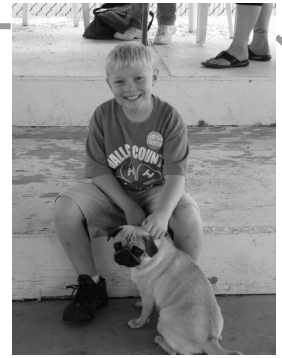
Join Alex and Shade as they FIGHT for a cure... We hope to see you there! Shawn, Michelle & Caden Roling

Check list for walk day—

- Parent permission slip if you have not turned it in!
- Layers of clothes, it will feel cold out by the water!
- Money you raised for CF
- Walking shoes
- Walk happens rain or shine.... Do you need an umbrella?

# Ways to help—

- We will need help with supervision and we'd love to have parents come along! **Be sure you have an identified adult signed up with your child!**
- Ask for donations for the cause. If you raise \$100 or more you will qualify for a CF shirt @ the walk
- Ask others to come along and raise money too.
- Top prize 10K earns you a lap-top



# A-D-M THANKS for your support!

- Ordering a shirt? Be sure to turn in your order by 4/29 at school
- Not ordering a shirt— no problem, wear a RED ADM shirt on walk day!

**FORMS**

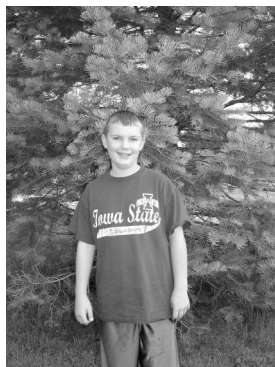
- Walk registration
- Parental permission slip
- Bus sign up

**Where to send forms:**

We must have original signatures on the consent form— you must mail or drop forms off to:  
**TEAM HALL**  
 1412 HyVue Street  
 Adel, IA 50003

**Can't come on walk day AND still want to support the cause?**

**Sponsor another walker!**



Questions?

Michelle Roling michelle@michelleroling.com  
 h-515.993.7310 c-515.231.3918

## Registration and Waiver To Attend CF Function TEAM HALL:

Walker's full name: \_\_\_\_\_

Phone: \_\_\_\_\_

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

e-mail: \_\_\_\_\_

Each participant must sign this waiver: I, the understated, agree to indemnify and hold harmless the Cystic Fibrosis Foundation from all cost, expense and liability arising out of my or my child's participation in this event to benefit the Cystic Fibrosis Foundation. I do hereby waive all claims for damage or loss to me or my child's person or property which may be caused by an act or failure to act, by the Cystic Fibrosis Foundation, its officers, agents or employees arising directly or indirectly from my or my child's participation in this event and I hereby assume liability for any loss, damage or other liability from such event.

**IMPORTANT:**

I give permission to the CFF to use any pictures, video footage etc. that is taken at the walk to use in future promotional materials.

I have read the above information. I fully understand what it means, and have signed it voluntarily.

Participant's

Signature: \_\_\_\_\_ Date \_\_\_\_\_

If walker is a minor a legal guardian's signature is required here:

\_\_\_\_\_

Emergency Phone where a guardian can be reached today: \_\_\_\_\_

Who will be picking your child up at the 6-7 building in Adel prior to our return:

Name: \_\_\_\_\_ Phone number: \_\_\_\_\_

If your student has permission to walk home please sign here \_\_\_\_\_

\*\*\* If you will not be attending the walk with your student 6<sup>th</sup> grade and younger please complete.

What adult will be chaperoning your child on walk day? -----

\_\_\_\_\_

What is their phone number? \_\_\_\_\_

**Short notice---GREAT STRIDES TEAM HALL shirt order due  
4/29!!!!**

**SHOW YOUR SUPPORT—**

Order your ADM TEAM HALL SHIRTS--- red shirts with black print

The front will have the saying:

**A**lways

**D**reaming 4

**M**iracles

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

Phone: \_\_\_\_\_

ADM building you want your

Item/s delivered to: \_\_\_\_\_

The back will say:

TEAM HALL

Fighting Cystic Fibrosis

e-mail: \_\_\_\_\_

Design will be shown at [www.michelleroling.com](http://www.michelleroling.com) once complete

**T-shirts- standard short sleeve \$ 13.00 Per t-shirt**

# Adult sizes	Total for items	# child sizes	Total for items
___ Small	_____	___ 10-12	_____
___ Medium	_____	___ 14-16	_____
___ Large	_____		
___ X- Large	_____		
___ XX-Large	_____		
___ XXX Large	_____		

**Long Sleeve t-shirts--- Gildan brand**

**\$ 15.50 per long sleeve shirt**

# adult sizes only for this item	Total for items
___ Small	_____
___ Medium	_____
___ Large	_____
___ X- Large	_____
___ XX-Large	_____
___ XXX Large	_____

**Hoodies- Gildan—**

**\$ 23.00 per hoodie**

# adult sizes	Total for items	# child sizes	Total for items
___ Small	_____	___ 10-12	_____
___ Medium	_____	___ 14-16	_____
___ Large	_____		
___ X- Large	_____		
___ XX-Large	_____		
___ XXX Large	_____		

Total Cost: \_\_\_\_\_

Please put your form, payment (exact change or checks made to Michelle Roling) in an envelope and turn them into the school office. ALL orders will be picked up at the end of the school day on Thursday April 29<sup>th</sup>!!!!