


2004 TRACK & FIELD PHOTO CD-ROM ORDER FORM

MAIN FAX #: 503-218-6523 ALTERNATE FAX#: 419-821-4872

QUESTIONS: 231-582-2092 (9AM-5PM Eastern, M-F)

PRICE OF CD-ROM: \$20 PER CD + \$5 PER CD FOR SHIPPING, HANDLING & TAX = \$25

NAME OF EVENT	DATE	COST	QUANTITY	TOTAL
U.S. Olympic Team Trials Track & Field Day 1,2,3,4,5,6 - Sacramento, CA	07/09/04 to 07/16/04	\$100		
U.S. Olympic Team Trials Track & Field Day 6 - Sacramento, CA	07/16/04	\$25		
U.S. Olympic Team Trials Track & Field Day 5 - Sacramento, CA	07/15/04	\$25		
U.S. Olympic Team Trials Track & Field Day 4 - Sacramento, CA	07/12/04	\$25		
U.S. Olympic Team Trials Track & Field Day 3 - Sacramento, CA	07/11/04	\$25		
U.S. Olympic Team Trials Track & Field Day 2 - Sacramento, CA	07/10/04	\$25		
U.S. Olympic Team Trials Track & Field Day 1 - Sacramento, CA	07/09/04	\$25		
HANSONS MIDWEST DISTANCE SOLUTION T&F MEET: Hillsdale, MI	06/10/04	\$25		
MHSAA UPPER PENINSULA T&F FINALS DIVISION 1,2,3: Kingsford, MI	06/05/04	\$25		
MHSAA LOWER PENINSULA T&F FINALS DIVISION 1: Rockford, MI	06/05/04	\$25		
MHSAA LOWER PENINSULA T&F FINALS DIVISION 2: Caledonia, MI	06/05/04	\$25		
MHSAA LOWER PENINSULA T&F FINALS DIVISION 3: Comstock Park, MI	06/05/04	\$25		
MHSAA LOWER PENINSULA T&F FINALS DIVISION 4: Houseman Field, Grand Rapids, MI	06/05/04	\$25		
MHSAA T&F REGIONAL 30-3: Benzie Central High School, MI	05/22/04	\$25		
MHSAA T&F REGIONAL 9-1: Holly, MI	05/21/04	\$25		
East Jordan Invitational: East Jordan, MI	05/13/04	\$25		
Inland Lakes Invitational: Inland Lakes, MI	05/10/04	\$25		

Price effective through June 31st, 2004

All money payable in United States Currency

Gaylord Invitational: Gaylord, MI	05/07/04	\$25		
Boyne City Track Meet: Boyne City, MI	04/26/04	\$25		
Hillsdale Gina Relays °V Day 1: Hillsdale College, Hillsdale, MI	04/23/04	\$25		
Charlevoix H.S. Track Meet: Charlevoix, MI	04/19/04	\$25		
Harbor Springs Quad Track Meet: Harbor Springs, MI	04/15/04	\$25		



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CHECK/MONEY ORDER	CREDIT CARD: FAX or MAIL
REMIT CHECK TO: RUNMICHIGAN.COM ATTN:JUDITH CUTLER 03453 TERRACE ROAD BOYNE CITY, MI 49712	Please Check Credit card type: VISA____ MC____ CREDIT CARD NUMBER_____ EXPERATION DATE_____ NAME ON CARD:_____ ADDRESS:_____ CITY:_____ STATE:_____ ZIP:_____
SHIPPING ADDRESS: NAME: _____ ADDRESS:_____ CITY:_____ STATE:_____ ZIP:_____ PHONE NUMBER _____ EMAIL ADDRESS_____	