

How to Register for SLUDM!

1. Go to our website sludm.org, click the Register/Donate tab, scroll down to the bottom, and click the link. Or just go to <http://www.helpmakemiracles.org/event/sludm>
2. Click register now!

Get Involved

REGISTER NOW! SIGN UP FOR NEWSLETTER DONATE TODAY

GET THE WORD OUT

Like 4
Tweet 0
Share 2
+1 0

Embed a Badge!

ACCOUNT LOGIN

E-mail Address:
Password:

[Forgot Password?](#)

PARTICIPANT / TEAM SEARCH

Looking for an individual or team

Saint Louis University Dance Marathon
Join us on November 19, 2011

Details

Location: Busch Student Center Wool Ballrooms
St. Louis, Missouri

Starts: 11/19/2011 @ 3:00 pm
Ends: 11/20/2011 @ 3:00 am

Check-in Time: 2:00 pm to 3:00 pm
Registration Cutoff: 11/19/2011 3:00 pm
Donation Cutoff: 12/31/2011 12:00 am

Contact: Erin Brehm & Grace LaRosa
Phone: 801-214-7400
E-mail Address: sludmdancers@gmail.com

SPONSORED BY

Children's Miracle Network Hospitals

TOP FUNDRAISERS

1. [Carli Mungovan](#)
2. [Christina Gabany](#)
3. [Julie Friend](#)
4. [Kerry Murphy](#)
5. [Amanda Drapac-Novotny](#)
6. [Emily McDermott](#)
7. [Meredith O'Neill](#)
8. [Emma Dwyer](#)
9. [Anna Husemann](#)
10. [Rebecca Graue](#)

To register for this event click the Register Now! button to get started! Once you

3. Click **Dancer** under participant type! Then either register as an individual and be placed with a group the day of.

Saint Louis University Dance Marathon

Step 1 — Event Role & Additional Details

Please select the type of participant you would like to register as for this event.

Event Role Details

Participant Type*

Committee Member – Registration Fee: \$ 15.00

Dancer – Registration Fee: \$ 15.00

Executive Board – Registration Fee: \$ 15.00

Morale Captain – Registration Fee: \$ 15.00

Fundraising Goal*

Role*

Individual

Join a Team

Create a Team

OR click **join a team** and scroll through select team to find an existing team for all your friends!

Role*

Individual

Join a Team

[Select Team...]

- SLUDM Team
- Alpha Delta Pi
- Don't Slow Down
- External Team**
- Internal Team
- Morale Captains
- One Dub. One Love.
- Super Beat Infuszion

OR create a new team for all your friends to join later! Just enter a team name, fundraising goal, and team type.

Role*

- Individual
- Join a Team
- Create a Team

Team Name*

Dancing the Night Away

Team Goal*

\$ 1,000

Team Type*

SLUDM Team

4. Answer all the registration questions and agree to the terms and conditions! Please make sure all info is correct before continuing to next step!

Registration Questions

Emergency Contact Information - Name, Phone Number *

Jane Doe (317) 455 - 6584

Do you have any medical conditions or allergies we should be aware of *

N/A

Have you ever been treated at Cardinal Glennon Children's Medical Center or St. Louis Children's Hospital

- Yes, I have and would LIKE to share my story
- Yes I have, but would NOT like to share my story
- No

What size T-Shirt would you like *

Medium

How did you learn about the event *

friends

Would you like further information on SLUDM and future events

Yes

Year of graduation *

2012

5. Fill out all your information and make an account!

Saint Louis University Dance Marathon

Step 2 of 4 — Contact Details

Been here before?

[Login to your account](#) to prefill the fields below with your information.

Contact Details

First Name *

Jane

Last Name *

Doe

Address *

20 N. Grand Blvd

Apt, Suite, Bldg

City *

St. Louis

State/Province *

Missouri

Zip/Postal Code *

63018

Country *

United States

Format: 12345(-1234)

Phone *

318-376-3847

Format: 123-123-1234

Account Information

E-mail Address * (This is your username. [Privacy](#))

jdoo@slu.edu

Confirm E-mail *

jdoo@slu.edu

Password *

....

Confirm Password *

....

6. Fill in your billing information to pay for the \$15 registration fee. Click submit and you are officially registered!

Saint Louis University Dance Marathon

Step 3 of 4 — Billing Information

Billing Details

Registration Fee: **\$15.00** [Promo Code](#)

Payment Type



Card Number *

Name on Card *

Card Exp Date *

 /

CVV2 Code *

 [What is this?](#)

Billing Address *

Apt, Suite, Bldg

Billing City *

Billing State/Province *

Billing Zip/Postal Code *

Billing Country *

Format: 12345(-1234)

Billing Phone *

Format: 123-123-1234

I would like to make an additional donation (optional)

Donation Amount

- to this event
 toward my fundraising goal

or [Cancel](#)