



Grant Application Form 2026

Kicks for CU Kids is an Illinois-based not-for-profit program that provides youth from the greater Champaign-Urbana area with an essential tool to pursue a life of health and fitness. The goal of the organization is to provide professionally-fitted running shoes and running socks to local youth runners who participate through organized running programs in races associated with the Christie Clinic Illinois Race Weekend, held annually in April. *Kicks for CU Kids* was created to address a gap in opportunity that exists for some youngsters in the Champaign-Urbana area who are underrepresented in the Christie Clinic Illinois Race Weekend, which is committed to diversity, equity, inclusion, and belonging.

Please complete the grant application form on the following page in its entirety. Grant forms must be submitted to Christie Clinic Illinois Race Weekend office no later than Friday, March 27, 2026, either by email or mail. Funding is limited, so apply as soon as possible and have all information available.

Eligible youth for the running shoe program must be actively enrolled at the school, after-school, or community program applying for the grant, must be participating in your running program, and must participate in either the 5K on Friday, April 24 or Busey Bank Illinois Youth Run on Saturday, April 25, 2026.

Youth must be present at the scheduled shoe measuring and shoe distribution so each can be properly fitted for their running shoes. After Race Weekend, participating youth will receive an official race finisher certificate.

Please sign here that you have read and understand the above.

Printed Name: _____

Signature: _____

Organization Name: _____

2026 Financial support for *Kicks for CU Kids* provided by Body n' Sole Sports, Human Kinetics, Serra Champaign, the Village of Savoy, and Second Wind Running Club.



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Organization (Please print) _____

Address _____

Primary contact and/or Coach's name _____

Phone number(s) and email(s) _____

What are the demographics of your running program? _____

How many individuals are participating in your running program? _____

For how many individuals in the 5K or Youth Run are you requesting shoes and socks? _____

How long has your running program been in existence? _____

How often does your running program meet? _____

Does your program receive outside sponsorship money

If yes, from whom? _____

Does your program receive funding from any other sources? _____

If yes, from whom? _____

Please provide a brief description of the training and education program that your organization provides.

Please email a scanned copy of your application to director@illinoismarathon.com or mail your completed form to Christie Clinic Illinois Race Weekend, PO Box 262 Champaign IL 61824.