Playworks Charity Team Boston Marathon® Application





117th Boston Marathon - April 15, 2013

All pages of the application must be completed and returned no later than **Saturday, December 1, 2012**, or applications will continue to be accepted until all spots are full.

Send completed applications to: Playworks

Attention: CJ Strauss 29 Germania St Boston, MA 02130 Fax: 617.849.5791

Email: cstrauss@playworks.org

Once we receive your application we will charge the below provided credit card a **non-refundable \$35** application fee (the amount it costs for a kickball set at one of our schools).

| Contact Information Last Name | | First Name | | | |
|---|---|------------|---------|-----|--|
| Address | | | | | |
| Country | City | | State | Zip | |
| Home Phone | | Cell Phone | | | |
| Employer | | Title | | | |
| Work Address | | | Country | | |
| City | | State | Zip | | |
| Work Phone | | Fax | | | |
| Email Address | | | | | |
| I would like to be contacte | ed at: Home | Work | | | |
| Fundraising Experience 1.) Have you participated money did you raise? | | , , - | , | · | |
| Charity/Race Name | | | Raised: | \$ | |
| 2.) What will your fundrais | sing goal be for Playworks | 5? | | | |
| \$ | (minimum commitment is \$4,000) | | | | |
| 3.) What are your ideas fo | | | | | |
| 4.) Does your company ha | ve a matching gifts progra | am? Yes | No | | |

| Please answer the following questions so that we can get to know you. | | | | |
|---|--|--|--|--|
| 1.) How did you learn about Playworks? | | | | |
| | | | | |
| 2.) What is your favorite playground game or sport to play? | | | | |
| | | | | |
| 3.) What other community organizations are you involved with? | | | | |
| 4.) What has been your experience fundraising for these other organizations in the past? | | | | |
| —————————————————————————————————————— | | | | |
| | | | | |
| 5.) Please describe why you would like to run for Playworks: | | | | |
| | | | | |
| | | | | |
| 6.) How do you see yourself becoming involved with Playworks after the Marathon? | | | | |
| 7.) Playworks will be holding meetings for group training and planning. Do you foresee any conflicts in attending these meetings? If yes, what is the reason? | | | | |
| Running Experience: | | | | |
| My running level:BeginnerIntermediateAdvanced | | | | |
| Current weekly running mileage: Typical training pace (minutes per mile) | | | | |
| Number of previous marathons you have run? | | | | |
| Have you run Boston? Best marathon time/location/date: | | | | |
| Additional Information: | | | | |
| Social Networking Sites I use:FacebookLinkedInTwitterOther | | | | |
| Hometown newspaper (please specify town and state): | | | | |
| Your hobbies/sports/interests: | | | | |
| | | | | |
| A note about yourself – best run ever/toughest race/anything unique/extraordinary: | | | | |
| | | | | |
| | | | | |

Playworks Marathon Team Terms and Conditions

Please read the following carefully before signing. FUNDRAISING COMMITMENT:

A minimum commitment of \$4,000 is required to join the Playworks Marathon Team and receive an individual entry for the 2013 Boston Marathon. A non-refundable deposit of \$100 will be charged to your credit card once you have been accepted onto the team, verifying your acceptance. The deposit of \$100 will be applied toward your fundraising minimum and holds a Boston Marathon number in your name until March 1, 2013 when the remaining balance is due, unless prior arrangements have been made

Valid credit card information must be included with your application to apply for the Playworks team. In the event that you do not meet the minimum donation requirement by March 1, 2013, Playworks reserves the right to charge the balance owed to your credit card, unless prior arrangements have been made. MasterCard, Visa and American Express are accepted. If you continue to fund-raise after your credit card has been processed with the remaining balance we will reimburse your card upon written request. We will no longer reimburse your card after May 1, 2013.

CANCELLATION POLICY:

You may cancel your participation with the Playworks team for the Boston Marathon, waiving your responsibility for the \$4,000 minimum any time on or before *January 1, 2013*. To do so you must contact CJ Strauss at Playworks, in writing, on or before the cancellation date. Your \$100 deposit fee is non-refundable and any donations raised and received by our office will not be refunded. After January 1, 2013 you are responsible for raising the \$4,000 minimum, even if for any reason, including injury, you are unable to run in the Marathon.

I understand that after January 1, 2013, I am solely responsible for raising or personally giving the entire fundraising commitment, even if for any reason, including injury, I am unable to run in the 2013 Boston Marathon.

MATCHING GIFT POLICY:

Many companies match employee charitable contributions. You can check with your employer to see if your company has this program, and ask donors if their employers match gifts. Many companies issue matching gift checks quarterly or semi-annually: therefore if you plan to use a match to reach your minimum, it is your responsibility to contact the matching company to ensure the check will be issued before March 1, 2013. If the company's match cycle is past March 1, the match cannot count towards your minimum.

B.A.A. REGISTRATION FEE:

Playworks will inform you of the details of the B.A.A. registration after your application is accepted. The B.A.A. charges a \$300 race entry fee that does not count towards your fundraising commitment. This fee will be collected separately at a later date (early 2013). You should **NOT** contact the B.A.A. directly to secure your number.

RELEASE FORM AND CONTRIBUTION AGREEMENT:

In consideration of my accepting this entry, I hereby for myself, my heirs, executors, and administrators, waive and release any and all rights for claims and damages I may have against Playworks, its employees, volunteers, officers, and sponsors for any and all injuries suffered or sustained by me in said event, in the training and planning sessions for said event, or travel to or from any of the preceding. I further attest and certify that I am physically fit and have sufficiently trained for competition in this event, and a licensed medical doctor has verified my physical condition. I also grant permission for use of my name and or photograph or voice in broadcast, telecast, print, or any other account of this event and agree to waive any compensation for such use. I agree to my fundraising commitment of \$4,000 to Playworks by *March 1, 2013*. If I have not reached the minimum in sponsorships by that date, I will personally be responsible for the balance owed. I understand that unless I cancel by *January 1, 2013*, Playworks reserves the right to charge the balance I owe to my credit card. I declare that I have exercised my own judgment in signing this agreement and I further declare that the decision to sign this agreement was voluntary and not based on or influenced by any representation of Playworks.

EMERGENCY CONTACT:

| | | during the event or in the training and planning sessions | | | | | |
|---|-------------|--|--|--|--|--|--|
| for said event, I hereby authorize and give my consent to Playworks to secure from any accredited hospital, clinic and/or | | | | | | | |
| | • | care. I agree that I will be fully responsible for payment of cluding but not limited to medical transport, medications, | | | | | |
| · | | e contacted in the event of an emergency: | | | | | |
| | | Telephone Number: | | | | | |
| Allergies to medications: | | | | | | | |
| CREDIT CARD INFORMATION: | | | | | | | |
| MasterCard | _ Visa | American Express | | | | | |
| Card Number: | | Expiration Date: | | | | | |
| Name on Card: | | | | | | | |
| Billing Address: | | | | | | | |
| | | Date: | | | | | |
| APPAREL SIZES: | | | | | | | |
| Your unisex t-shirt size: | Your single | t size: | | | | | |
| Your shoe size: | | size: | | | | | |