



Center for Empowering Kids to Become Healthy Adults

**GoKids Marathon Team
2012 John Hancock Non Profit Program**

All pages of this application must be completed and returned by November 1, 2011 **or until all spots are filled.** Completion of this application does not guarantee you a spot on GoKids Boston Marathon team. You will be informed by November 14, 2011 if you've been chosen as a member.

Send completed applications to:

Susan Hurley 978-852-7891
CharityTeams Send to Email: charityteams@comcast.net
52 Russell Street
North Andover, MA 01845

Contact Information (Please Print Clearly):

Last Name: _____ First Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Date of Birth: _____

Home Phone: _____

Cell Phone: _____

Employer: _____ Title: _____

Work Address: _____

City: _____ State: _____

Zip: _____

Work Phone: _____

Fax: _____

Email Address: _____

Does your company have a matching gifts program? _____ Yes _____ No

I would like to be contacted at: _____ Home _____ Work

Shirt size: Singlet size: _____

Please answer the following questions so that we can get to know you:

1. Are you affiliated with GoKids Boston or the University of Massachusetts in any way: member, corporate member, volunteer, staff, relative or friend of someone working at GoKids Boston, etc.?

_____Yes _____No

If yes, how:

If no, how did you learn about GoKids Boston?

2. Have you had any experience with GoKids Boston?

_____ Yes _____ No

If yes, how and which program?

3. What other community organizations are you involved with?

4. Please describe why you would like to run for GoKids Boston:

5. How do you see yourself becoming involved with GoKids Boston after the Boston Marathon?

6. GoKids Boston will be holding regular meetings for group training and planning. Do you foresee any conflicts in attending these meetings? _____Yes _____No

If yes, what is the reason? _____

If no, please rate the following monthly meeting times (1 being most convenient, 3 being the least convenient) in the order that would best suit your schedule:

Weekdays_____ Weekday evenings_____ Weekend mornings_____

Running experience

1. What is the average number of miles per week that you have run during the past 3 months? _____
2. What has been your longest training run during the past three months? _____ Number of miles
3. Have you ever participated in the Boston Marathon before? _____ Yes _____ No

If yes, please list the date(s) and time it took you to complete it:

1. _____
2. _____
3. _____

4. Have you ever completed another full marathon (26.2 miles)? _____ Yes _____ No

If yes, when, where, and how long did it take you (list most recent first):

Date Location Time

1. _____
2. _____
3. _____
4. _____
5. _____

If no, what is the longest race that you have completed?

Distance: _____

Location: _____

Date: _____

Time: _____

5. Are you able to complete a marathon within 6 hours? _____ Yes _____ No

6. Do you currently belong to a running club? _____ Yes _____ No

If yes, which one? _____

If no, are you able to join a running club with a program to train for the Boston Marathon?

_____ Yes _____ No

Terms and Conditions for the 2012 Marathon Charity Programs

Please read the following carefully before signing below.

Fundraising Commitment: A minimum donation of \$5,000 is required to join the GoKids Boston Team and receive an official entry into the 2012 Boston Marathon®. Valid credit card information must be included with your application to apply for the GoKids Boston Team as well as a copy of the applicant's driver's license

Enclosed in your application please provide a \$35 processing fee. This processing fee and is non refundable. It does not in any way insure you a place on the team – all applications must be reviewed by GoKids Boston.

In the event that you do not meet the minimum donation requirement by April 13, 2012, GoKids Boston reserves the right to charge the balance owed to your credit card, unless prior arrangements have been made and agreed upon. MasterCard and Visa are accepted.

Fundraising timeline: to serve as a guideline so that the minimum is met prior to the Marathon.

By January 08, 2012 amount of fundraising required - \$2000.

By February 08, 2012 amount of fundraising required - \$3000

By March 08, 2012 amount of fundraising required - \$4000

By April 08, 2012 amount of fundraising required - \$5000.

THERE ARE NO EXCEPTIONS TO RAISING the MINIMUM. If a fundraising milestone is not met by the date noted, the runner will be charged the difference on their credit card provided to meet that and then reimbursed when other donations have been received to meet that minimum.

ALL RUNNERS MUST RAISE THE MINIMUM FUNDRAISING BY APRIL 08, 2012 AND NO RUNNER WILL BE ALLOWED PARTICIPATION IF THIS FUNDRAISING IS NOT COMPLETE BY APRIL 08, 2012.

Cancellation Policy: Your \$35 application fee is non-refundable. You may cancel your participation with the GoKids Boston Team waiving your responsibility for the \$5000. Minimum anytime on or before January 01, 2012. To do so you must contact Susan Hurley, Program Coordinator via Email at charityteams@comcast.net on or before January 01, 2012. After January 1, 2012 you are still responsible for raising the minimum \$5000, even if, for any reason including injury, you are unable to run in the marathon. If you cancel participation after this date, your credit card will be charged the balance of your fundraising commitment. Susan Hurley in cooperation with GoKids Boston has your consent do this.

Donations raised and received by our office will not be refunded, even if you cancel before January 1, 2012.

In the event that you have completed your fundraising, but are unable to run in April 2012 due to injury, you forfeit your waiver. No deferrals are allowed.

Matching Gift Policy: Many companies match employees' charitable contributions. You can check with your employer to see if your company has this program, and ask donors if their employer has matching gifts.

Matching gifts do not apply to the fundraising minimum but are considered over and above the minimum. It is your responsibility to contact the company to provide all matching gift information and insure that the gift is processed.

B.A.A. Registration: GoKids Boston will inform you of the details of the B.A.A. race registration after your application is accepted on the GoKids Boston Team. The B.A.A. charges a \$300 race application fee that does not count towards your fundraising commitment and is the separate sole responsibility of the team member. This fee will be collected separately at a later date. You should not contact the B.A.A. directly to secure your number. All BAA registration will go directly through Susan Hurley and be done online with the BAA office.

TEAM PARTICIPATION: All runners are expected to attend at least one of the meetings during the course of the training program. It is highly encouraged that unless you are an out of state runner you will attend as many of the training runs and meetings as possible in order to insure full benefit of training and running the Boston Marathon. This is not only for the purpose of safety but also to insure that the team is working together and is understanding of the participation it takes to be on a Team.

Release form and Contribution Agreement: In consideration of my accepting this entry, I hereby for myself, my heirs, executors and administrator, waive and release any and all rights for claims and damages I may have against John Hancock, Inc., GoKids Boston and its employees, volunteers, consultants including Susan Hurley, Charity Teams Coaches and consultants, 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 and 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 collect a minimum of \$5000 for GoKids Boston by April 08, 2012. If I have not reached the amount in donations by that date, I will personally be responsible for the balance owed. I fully understand that unless I cancel by January 1, 2012, GoKids Boston reserves the right to charge the balance I owe to my credit card after April 08, 2012. I declare that I have exercised my own judgment in signing this agreement and I further declare that the decision to sign this agreement is my own.

In the situation of a runner who defaults on this agreement and their credit card is not valid for any reason, GoKids Boston reserves the right to pursue collection of the debt and the runner will be responsible for any and all legal fees incurred by GoKids Boston with this collection process. GoKids Boston also reserves the right to have a runner's number cancelled due to non-payment of the minimum fundraising by the above-mentioned deadlines.

In the event of an illness, injury or medical emergency arising during the event or in the training and planning sessions for said event, I hereby authorize and give my consent to GoKids Boston to secure from an accredited hospital, clinic and/or physician any treatment deemed necessary for my immediate care. I agree that I will be fully responsible for payment of any and all medical services and treatment rendered to me including but not limited to medical transport, medication treatment and hospitalization. The following person should be contacted in the event of any emergency:

Name: _____ Relationship: _____ Telephone: _____
_____ Cell Phone: _____ Allergies/ Medications: _____

Please sign the below relative to the Terms and Conditions set fourth in the above-mentioned contract. No runner will be considered without providing the required documentation and credit card information.

Credit Card Information (please include a copy of credit card and photo ID also)

Name on Card:

Type of Card:

Address:

Number:

Security Code:

Signature to Authorize Use of Card for both Application Fee and Fundraising in the event the minimums are not met:

I have received the GoKids Boston "Boston Marathon® Charity Program Application" and understand all the terms and conditions of my participation in the 2012 program. I am confirming the information listed in the enclosed application. I have also noted the due date for material submission and fundraising goals.

SIGNATURE _____

DATE _____

I have received the GoKids Boston "Boston Marathon® Charity Program Application" and understand all the terms and conditions of my participation in the 2012 program. I am confirming the information listed in the enclosed application. I have also noted the due date for material submission and fundraising goals.

SIGNATURE _____

DATE _____

