



Join Team Free Arts!!!

New York City Half-Marathon Application

Please note: ALL applications must be completed and received by **February 24, 2012**.

Send completed applications to:

Free Arts NYC

Attn: Allison Burns

1431 Broadway, 7th Floor

New York, NY 10018

Phone: 212-974-9092

Fax: 917.289.3975

E-Mail: halfmarathon@freeartsnyc.org

(Please Print Clearly)

Last Name: _____ **First Name:** _____

Birth date (ex. 01/01/1900): _____ **Gender:** M ___ F ___

Home Address: _____

City: _____ **State:** _____ **Zip:** _____

Home Phone: (____) _____ - _____ **Cell Phone:** (____) _____ - _____

Employer: _____ **Title** _____

Work Address: _____

City: _____ **State:** _____ **Zip:** _____

Work Phone: (____) _____ - _____ **Fax:** (____) _____ - _____

Preferred E-mail: _____

I would like to receive mail at: Home ___ Work ___

Does your company have an employee matching gifts program? Yes ___ No ___

Fundraising Experience:

Have you ever participated in a half-marathon/marathon charity program before?

Yes ___ No ___

If so, for which charity and how much money did you raise?

Name: _____ **Amount:** \$ _____

What will your fundraising goal be for Team Free Arts? (min. \$1,200) \$ _____

What are your ideas for raising these funds?

Running Experience:

Are you an active runner? Yes ___ No ___

Are you a member of the New York Road Runner's Club? ___ Yes ___ No

Have you ever run in a half-marathon(s) before? ___ Yes ___ No

Which marathon(s)/ date(s)? _____

How often do you run? 5-7 times/week ___ 3-5 times/week ___ less than 3 times a week ___

Please answer the following questions so we can get to know you a little better:

How did you learn about Free Arts NYC and/or *Team Free Arts*?

What other community organizations are you involved with?

What has been your experience fundraising for these organizations in the past?

Additional Information:

What is your t-shirt size? (Circle one) **S M L XL**

Allergies to Medications: _____

Emergency Contact: (The following MUST be contacted in case of an emergency)

Name: _____

Telephone: (____) _____ - _____ Alternate #: (____) _____ - _____

Relationship: _____

(Applicants - please sign and date below)

Print Name: _____

Applicant's Signature: _____

Date: _____

Free Arts NYC thanks you for your support!!!



Team Free Arts
2012 New York City Half-Marathon
Sunday, March 18th, 2012
Terms and Conditions

RUNNERS

(This form must be signed below)

Registration and Fee: Once your Free Arts application has been received and accepted, you will receive an online invitation to register for the Half-Marathon through the NYRR entry site.

- Free Arts NYC will charge a \$5 processing fee which is required for all applicants. **This payment is non-refundable and will be processed when we receive your application**
- **NYRR charges a race entry fee that does not count toward your fundraising minimum. Runners are responsible for covering the NYRR race entry fee in addition to raising \$1,200 for Free Arts NYC.**
- You should NOT contact the New York Road Runners directly to secure your number.

Fundraising Commitment:

- You agree to collect a minimum of \$1,200 for Free Arts NYC by **Friday, March 2nd, 2012**. If you continue to fundraise, we will credit your account the balanced raised over \$1,200 on March 19th.
- If you have not reached the minimum by March 2nd, you will be personally responsible for the balance owed and we will charge the credit card on file for the remaining balance. **There are no exceptions.** If you continue to fundraise, we will credit your account the balance raised over \$1,200 on March 19, 2012.
- You agree that if you are unable to complete the race, due to injury beforehand, or for any other unforeseen circumstance, **you will still be personally responsible for the full \$1,200 balance owed.**
- You agree that if the race cannot be held for any unforeseen circumstance, any funds raised by you will not be refunded.

Matching Gift Policy: Many companies match employees' charitable contributions. Matching gifts will be counted towards your fundraising goal. Free Arts NYC encourages you to check with your employer to see if your company has a matching gift program, and ask your donors if their employers match gifts.

- It is your responsibility to contact the matching company to ensure eligibility and that the matching gift form will be issued before **Friday, March 2nd, 2012**.
- If Free Arts NYC does not receive the matching gift form prior to **Friday, March 2nd, 2012**, the match cannot count towards your minimum. If you receive a match after this date, we will credit your account the balance raised over \$1,200 on March 19, 2012.

Cancellation Policy: You are responsible for raising the \$1,200 minimum, even if for any reason, including injury, you are unable to run in the Half-Marathon.

Release Form and Contribution Agreement: In consideration for my acceptance onto **Team Free Arts** I agree that I will not hold Free Arts NYC, its employees, volunteers, officers, board members, and sponsors (the "Organization") responsible for any injuries or losses I might incur while participating in the Half-Marathon or travel to or from the Half-Marathon or any training sessions or meetings related to my participation in the Half-Marathon (the "Event Activities"). I hereby release and discharge the Organization from any and all claims, demands, damages, actions, and I voluntarily agree to assume full risk of any and all injuries, damages, or losses I may sustain as a result of participation in the Event Activities. I warrant that I have sufficiently trained for the Half-Marathon, and that a licensed physician has verified that I am fit to participate in the Half-Marathon. I grant permission for the use of my name, likeness, or voice and waive any compensation for said use. Free Arts NYC will not be liable for any injuries that occur during training and as a result of their training tips.

I understand that running a road race is a potentially hazardous activity. I understand that I should not enter and run unless I am medically able to do so and properly trained. I assume all risks associated with running in this event including, but not limited to: falls, contact with other participants, the effects of weather, traffic and course conditions, all such risks being known and understood by me.

In the event of an illness, injury or medical emergency, I authorize Free Arts NYC to secure from any 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, ambulance transport service, and treatment rendered to me including medications and hospitalization. I represent that I have secured adequate insurance against any injury or loss that I might sustain during, or as a result of participation in the Event Activities.

In consideration of this entry, on behalf of myself, my legal representatives, successors, heirs, assigns, executors and administrators, I hereby waive and release any and all rights and claims for damages of any kind I may have against Free Arts NYC/Team Free Arts and all sponsors, representatives and employees thereof for any and all injuries suffered by me arising out of my participation in this event.

I hereby grant permission to Free Arts NYC/Team Free Arts to use my name and/or photograph or voice in broadcast, telecast, print or any other account of this event for legitimate purposes.

I agree to abide by the rules of the New York City Half-Marathon as stated in all official race information.

Applicant's Signature: _____

Print Name: _____ **Date:** _____

CREDIT CARD INFORMATION: I give permission for this card to be charged the remaining balance on March 2nd, in the event that I have not reached my \$1,200 minimum commitment.

MasterCard ____ Visa ____ American Express ____

Credit Card Number: _____

Expiration Date: _____