



TEAM IMPACT

JOIN THE GOTTEAM

2021 ASICS FALMOUTH ROAD RACE APPLICATION

WHY RUN FOR TEAM IMPACT?

Team IMPACT tackles the emotional trauma and social isolation experienced by children facing serious and chronic illnesses by matching them with a college athletic team. Through our two-year therapeutic program that complements their medical treatments, children develop relationships and skills that help them complete the full circle of healing. Because no child should be sidelined by sickness.

YOUR COMMITMENT

Team IMPACT is an official charity partner of the 2021 ASICS Falmouth Road Race. We are seeking applicants for our team who have a passion for running and a commitment to supporting Team IMPACT's mission. A qualifying time is not required for participation, but applicants must be able to complete the 7 mile race in two and a half hours or less. Funds raised by the Team IMPACT Marathon Team will benefit the Team IMPACT program and help to expand the organization's outreach and expansion efforts. Runners receiving a guaranteed invitational entry bib from Team IMPACT will be required to raise a minimum of \$750. Team IMPACT will support each runner's individual fundraising efforts with a OneCause fundraising page and publicity through our social media channels.

Each runner is responsible for a \$750 fundraising minimum. If you do not meet the fundraising minimum, your card will be charged for the difference.

HOW TO APPLY

Send Completed Applications to:

Team IMPACT Attn: Falmouth Road Race
500 Victory Rd. Floor 3
Quincy, MA 02171
Email: goteam@goteamimpact.org

Application Deadline

July 1st, 2021

Selection Deadline

All applicants will be notified of the final team selections by July 1st, 2021





CONTACT INFORMATION

First Name: _____ Last Name: _____

Gender: _____ Birth Date: ____/____/____ Age as of XX (race date): _____

Address: _____

City: _____ State: _____ Zip: _____

Country: _____ Email Address: _____

Cell Phone: _____ Primary Phone: _____

Emergency Contact Information

1st Emergency Contact: _____ Relation: _____

Best Phone for Immediate Contact: _____

2nd Emergency Contact: _____ Relation: _____

Best Phone for Immediate Contact: _____

FUNDRAISING

For runners receiving a bib: The team IMPACT Marathon Team fundraising minimum is \$750 per bib. If selected, you agree to raise a minimum of \$750 for Team IMPACT with the help of the Team IMPACT name and a personal fundraising page on OneCause. Team IMPACT will inform you of the details of registration after your application is accepted.

Have you ever participated in an athletic fundraising event for charity? If yes, which charity and how much did you raise? (Please begin with the most recent.)

Charity Name: _____ Event Type: _____ \$ Raised: _____

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Fundraising Cont.

What will your personal fundraising goal be for Team IMPACT for the Falmouth Road Race? \$ _____
Note: Minimum amount required is \$750.

How many potential donors will you contact? _____

How many times do you anticipate following up with potential donors? _____

Are you affiliated with a company that matches charitable donations? _____

If so, which company? _____

Describe your fundraising plan if you receive one of Team IMPACT's bibs for the 2021 Falmouth Road Race:

Describe why you want to run for Team IMPACT:



Employment Cont.

How many coworkers do you have (approximate): _____

Are you comfortable asking your coworkers to donate? _____

Does your company match charitable donations made by its employees? _____

Will your company match any donation made by an employee to your cause? _____

ADDITIONAL INFORMATION

Do you use social media? Facebook Twitter Instagram Other

Do you have a blog? No Yes Web Address: _____

Hometown Newspaper (Please specify town and state): _____

Current Newspaper: (Please specify town and state): _____

Team IMPACT will provide each runner with one Team IMPACT branded singlet to wear on race day. Please select your preferred size.

 XS Small Medium Large XL XXL

CREDIT CARD INFORMATION

Credit Card Company: _____

Card Number: _____

Expiration Date: _____ Security Code: _____ Name on Card: _____

Billing Address: _____

Signature of Card Holder: _____



TERMS AND CONDITIONS

Fundraising Commitment: A minimum fundraising requirement of \$750 is required to join the Team IMPACT Race Team. Injury or inability to take part in or complete the race for any reason does not release you from your fundraising commitment.

Cancellation Policy: You may decline your participation within 48 hours of being offered a spot on the team. To decline or cancel, you must contact Team IMPACT at goteam@teamimpact.org within the required time period.

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 your 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 September 15, 2021.

Release Form and Contribution Agreement: In consideration of my accepting this individual entry, I hereby waive and release any and all rights for claims and damages I may have against Team IMPACT, 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 will sufficiently train for competition in this event. 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 waiver any compensation for such use.

Information Release: I give Team IMPACT, its designees, agents and assigns, unlimited permission to use, publish and republish in and any form or media, information about me and reproductions of my likeness (photographic or otherwise) and my voice, with or without identification of me by name.

I have read this application and agree to its terms and conditions.

YES

NO

Print Name: _____

Date: _____

Signature: _____

Date: _____