

Colon Cancer Foundation® (CCF) United Airlines NYC HALF 2019 Charity Runner Application



Thank you for your interest in participating in this year's Colon Cancer Foundation® (CCF) Charity Runner team for the 2019 United Airlines NYC Half

Please fax completed application to 914.305.6675 or scan and email to info@coloncancerchallenge.org to reserve your spot.

PERSONAL INFORMATION

First Name _____

Last Name _____

Address _____

City, State, Zip _____

Email Address _____

Home Phone _____

Business Phone _____

Cell Phone _____

Emergency Contact Name _____

Emergency Contact Telephone Number _____

Date of Birth: _____ Gender: Male: _____ Female: _____ T-shirt Size: _____

Please include my contact info. in a team roster to be distributed amongst the team. ____Y____N

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**CONTRIBUTION AGREEMENT – United Airlines NYC HALF GUARANTEED ENTRY
Non-NYRR Member**

_____ I would like to secure a guaranteed race entry into the 2019 United Airlines NYC HALF with the Colon Cancer Foundation® Charity Runner Team.

- I understand that my program registration and guaranteed entry into the 2019 United Airlines NYC Half Marathon is based on my ability to meet the **minimum fundraising requirement of \$1250 by March 1, 2019.**
- I understand that I am also responsible for a **Non-Refundable Registration Fee of \$170.00.**
- **The Registration Fee** will be charged to my credit card upon acceptance of this application to the Colon Cancer Foundation® Charity Runner Team.
- **A Non-Refundable Re-Commitment Deposit of \$625 (50% of the total) is due by January 4, 2019.** If I have not raised this amount by the due date, I will be allowed to personally make up the difference by check or credit card. **If I do not raise or pay this amount, my 2019 United Airlines NYC HALF entry is subject to forfeit.**
- **I understand that the Foundation has limited spaces available for this event which are awarded based upon the participant's ability to meet the minimum fundraising requirement of \$1250.**
- In exchange, I will be given access to Team Colon Cancer Challenge program benefits including: Access to virtual training program, Team Colon Cancer Foundation® Tech Shirt, Team Hat, Fundraising Page and support, and Pre-race team dinner.
- **AFTER January 4, 2019, I AM RESPONSIBLE FOR RAISING THE \$1250.00 MINIMUM, EVEN IF I CANCEL FOR ANY REASON, INCLUDING INJURY.**

I have read and understood all of the terms above and agree to participate:

Applicant's Signature

Date

CREDIT CARD INFORMATION

Cardholder's Name _____

Credit Card Type _____ Amex ___ Visa _____ MasterCard

Credit Card Number _____

Expiration Date _____ Security Code _____

Signature _____

_____ **By checking this box, you authorize the Colon Cancer Challenge Foundation to charge your credit card in the event that you do not fulfill your fundraising obligation by March 1, 2019.**

CONTRIBUTION AGREEMENT – UNITED AIRLINES NYC HALF GUARANTEED ENTRY

NYRR Member

_____ I would like to secure a guaranteed race entry into the 2019 UNITED AIRLINES NYC Colon Cancer Foundation® Charity Runner Team.

- I understand that my program registration and guaranteed entry into the United Airlines NYC Half Marathon is based on my ability to meet the minimum fundraising requirement of **\$1250 by March 1, 2019.**
- I understand that I am also responsible for a **Non-Refundable Registration Fee of \$155.00.**
- **The Registration Fee** will be charged to my credit card upon acceptance of this application to the Colon Cancer Foundation® Charity Runner Team.
- **A Non-Refundable Re-Commitment Deposit of \$625 (50% of the total) is due by January 4, 2019.** If I have not raised this amount by the due date, I will be allowed to personally make up the difference by check or credit card. **If I do not raise or pay this amount, my 2019 UNITED AIRLINES NYC HALF entry is subject to forfeit.**
- **I understand that the Foundation has limited spaces available for this event which are awarded based upon the participant's ability to meet the minimum fundraising requirement of \$1250.**
- In exchange I will be given access to Team Colon Cancer Challenge program benefits including: Access to the NYRR personalized virtual training program, Race Day Planning, Team Colon Cancer Foundation® TechShirt, Fundraising Page and support, and complimentary registration for TEAM CCC events.
- **AFTER JANUARY 4, 2019, I AM RESPONSIBLE FOR RAISING THE \$1250.00 MINIMUM, EVEN IF I CANCEL FOR ANY REASON, INCLUDING INJURY.**

I have read and understood all of the terms above and agree to participate:

Applicant's Signature

Date

CREDIT CARD INFORMATION

Cardholder's Name _____

Credit Card Type _____ Amex _____ Visa _____ MasterCard _____

Credit Card Number _____

Expiration Date _____ Security Code _____

Signature _____

_____ **By checking this box, you authorize the Colon Cancer Challenge Foundation to charge your credit card in the event that you do not fulfill your fundraising obligation by March 1, 2019.**