TEAM IMPACT

JOIN THE GOTEAM

2022 FALMOUTH ROAD RACE

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 excited to be a part of the 50th running of the Falmouth Road Race on August 21, 2022. We are seeking applicants for our team who have a passion for running and are committed to supporting the Team IMPACT mission. Funds raised by the Team IMPACT Road Race 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 $1,250. 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 $1,250 fundraising minimum. If you do not meet the fundraising minimum your card will be charged the difference.

HOW TO APPLY

Email Completed Applications to:
goteam@goteamimpact.org

Application Deadline:
Wednesday June 1, 2022

Selection Deadline:
Runners will be notified by June 1 on a rolling basis.

CONTACT INFORMATION

First Name: _____ Last Name: _____

Gender: _____ Birth Date: ____/____/____ Age as of August 21, 2022: _____

Address: _____

City: _____ Date: _____ 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 $**1,250** per bib. If selected, you agree to raise a minimum of $1,250 for Team IMPACT with the help of the Team IMPACT name and a personal fundraising page on OneCause. You are responsible for your race entry fee. The entry fee does not count toward your $1,250 fundraising minimum and cannot be paid for using funds raised towards your minimum requirements. 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 $1,250- you can set a higher goal but will only be held responsible for $1,250 .

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 IMAPCT's bibs for the 2022 Falmouth Road Race:

Describe why you want to run for Team IMPACT:

RUNNING EXPERIENCE

Running Level: Beginner ◯ Intermediate ◯ Advanced ◯

Current weekly running mileage: _____

Typical running pace (minutes per mile): _____

If you have not run this race before, what is the longest distance you have run? _____

Have you ever had an injury that has impacted your ability to run or could impact your training? If yes, indicate the specific injury and the date it occurred. (Please begin with the most recent.)

Specific Injury: _____ Date: _____

Specific Injury: _____ Date: _____

Specific Injury: _____ Date: _____

EDUCATION

Post-Graduate Institution (if applicable): _____ Class of: _____

Graduate Institution (if applicable): _____ Class of : _____

Undergraduate Institution (if applicable): _____ Class of : _____

EMPLOYMENT

Employer: _____ Title: _____

Work Address: _____

City: _____ State: _____ Zip: _____

Work Phone: _____ Work Email Address: _____

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 ☐

Instagram Handle: _____

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 $1,250 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. If your fundraising commitment of $1,250 is not met, your credit card will be charged for the remaining amount.

Cancellation Policy: You may decline your participation within 24 hours of being offered a spot on the team. To decline or cancel, you must contact Team IMPACT at goteam@teamimpact.org within 24 hours.

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 August 21, 2022.

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.

Entry Fee: Team IMPACT will inform you of the details of the entry process after your application is accepted. You are required to pay for your entry fee to the 2022 Falmouth Road Race .

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 _____

VOLUNTEER WAIVER
AND RELEASE OF LIABILITY

This Waiver and Release of Liability (the "Waiver") executed by _____ ("Volunteer"), releases Team IMPACT, Inc. ("Team IMPACT"), a federally recognized 501(c)(3) nonprofit corporation, organized existing under the laws of the Commonwealth of Massachusetts, and each of its directors, officers, employees, and agents, as stated herein.

The undersigned Volunteer desires to provide volunteer services and engage in activities related to such volunteer service for the non-profit entity Team IMPACT. Volunteer understands that the activities may include event setup, registration, and breakdown, packing Signing and Graduation Day Kits, or other related activities. Volunteers understand that the scope of their relationship with Team IMPACT is limited to volunteer positions with no compensation expected in return for services provided. Volunteers understand that Team IMPACT will not provide any benefits traditionally associated with employment to them, and that each Volunteer is responsible for his/her own insurance coverage in the event of personal injury or illness as a result of Volunteer's services to Team IMPACT.

1. **Waiver and Release**: Volunteer hereby releases and forever discharges and holds harmless Team IMPACT, and its successors and assigns, from any and all liability, claims, and demands of whatever kind or nature, either in law or inequity, which arise or may hereafter arise from the services provided to Team IMPACT. Volunteer understands and acknowledges that this Waiver discharges Team IMPACT from any liability or claim the Volunteer may have against Team IMPACT with respect to bodily injury, personal injury, illness, death, or property damage, that may occur while providing volunteer services, or which may occur as a result of such volunteer services, to Team IMPACT.

2. **Insurance**: Volunteer understands that Team IMPACT does not assume any responsibility for, or accept any obligation to, provide financial or other assistance, including but not limited to medical, health, or disability benefits or insurance. Volunteer expressly waives any such claim for compensation or liability on the part of Team IMPACT beyond what may be offered freely by Team IMPACT, in the event of injury or medical expenses incurred by me.

3. **Medical Treatment**: Volunteer hereby releases and forever discharges Team IMPACT from any claim whatsoever which arises or may hereafter arise on account of any first-aid treatment or other medical services rendered in connection with an emergency during time spent volunteering with Team IMPACT.

4. **Assumption of Risk**: Volunteer understands that the services provided to Team IMPACT may include activities that may be hazardous including, but not limited to, physical activity, bright lights, loud noises, presence on the sideline at sporting events, presence at crowded events, or any other such circumstances involving what may be inherently dangerous activities. Volunteer hereby expressly assumes risk of injury or harm from these activities and releases Team IMPACT from all liability therewith.

5. **Confidentiality**: Volunteer acknowledges that, in the course of any volunteer service provided to Team IMPACT, information may be provided that is confidential in nature. Therefore, Volunteer agrees not to disclose it without the express written permission of Team IMPACT. It is acknowledged by the Volunteer that any information furnished, or to be furnished, to Volunteer, in the course of their service, should be regarded as, and is, in all respects, confidential in nature, other than information which is in the public

VOLUNTEER WAIVER AND RELEASE OF LIABILITY

domain through other means, and that any disclosure or use of the same by Volunteer may cause serious harm to Team IMPACT.

6. **Media Release**: Volunteer hereby grants and conveys to Team IMPACT all rights, titles, and interests in any and all photographs, digital images, and video or audio recordings of the Volunteer, or their likeness or voice, in connection with volunteer services, whether made by Team IMPACT or a third party retained by Team IMPACT.

7. **If/As Applicable**
   Race/Marathon Liability: I will not hold Team IMPACT responsible for injury or death related to training for, or participating in, any Road Race or Marathon as part of Team IMPACT's "Go Team" Running Team.

8. **COVID-19**: Volunteer acknowledges the following:
   a. I will not attend any Team IMPACT in-person volunteer opportunity if I have been diagnosed with COVID-19 within 2 weeks (14 days) prior to such an opportunity, nor will I attend any in-person volunteer opportunity with Team IMPACT if, to the best of my knowledge, I have been exposed to others diagnosed with, or showing symptoms of the COVID-19 virus, within 2 weeks (14 days) previous to the in-person event or meeting.
   b. I will self-monitor for signs and symptoms of COVID-19 (symptoms typically include fever, cough, and shortness of breath) and immediately notify my Team IMPACT point-of-contact if I experience symptoms of COVID-19 within 14 days of attending an in-person volunteer.
   c. I certify that I am not in a high-risk category as identified by the CDC, or, if I am in such a category, that I am undertaking this risk knowing that I belong to such a category.

Volunteer expressly agrees that this Waiver is intended to be as broad and inclusive as permitted by the laws of the Commonwealth of Massachusetts and that this Waiver shall be governed by and interpreted in accordance with those laws. In the event that any clause or provision of this Waiver is deemed invalid, Volunteer agrees that the enforceability of the remaining provisions of this Waiver shall not be affected.

By signing below, I, the Volunteer, express my understanding and intent to enter into this Waiver and Release of Liability willingly and voluntarily.

_____ _____
Signature Date

_____
Printed Name

_____ _____
Signature (of Parent/Guardian if Volunteer is a minor) Date

_____
Printed Name