



2014 Big Sur International Marathon
ENTRY APPLICATION
In support of the Boomer Esiason Foundation

Release Form & Contribution Agreement:

In accepting this entry, I hereby for myself and anyone entitled to act on my behalf, waive and release any and all rights to claim for damages I may have against the Boomer Esiason Foundation (BEF) and sponsors for all injuries suffered by me leading up to or during the 2014 Big Sur International Marathon. I further attest and certify that I am physically fit at present and will sufficiently train for competition in this event, and a licensed medical doctor has verified my physical condition. **I agree to collect a minimum of \$1,500 for the Boomer Esiason Foundation by April 18, 2014.**

The purpose of the Team Boomer Big Sur International Marathon Group is to spread awareness and raise much-needed funds to find a cure for cystic fibrosis, and to support programs that help those with CF live longer, healthier lives.

As a participant, I agree to take on this mission and adhere to all fundraising commitments/cancellation policies as follow:

- **A minimum amount of \$1,500 must be raised and collected by the Boomer Esiason Foundation by April 18, 2014.**
- **A \$75 Registration Fee will be charged to my credit card upon acceptance to Team Boomer.** This amount will count toward my fundraising minimum.
- **A Dedication Deposit of \$750 (50% of the total) is due by February 28, 2014.** 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 2014 Big Sur International Marathon entry is subject to forfeit.*

AFTER FEBRUARY 28, 2014, I AM RESPONSIBLE FOR RAISING THE \$1,500 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

***** NOTE: DONATIONS RAISED AND RECEIVED BY THE BOOMER
ESIASON FOUNDATION CANNOT BE REFUNDED*****

Boomer Esiason Foundation
483 Tenth Avenue, Suite 300, New York, NY 10018
phone 646-292-7930 fax 646-292-7945
www.esiason.org



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NAME (as it appears on your credit card) _____

CIRCLE ONE: AMEX MC VISA DISCOVER

CREDIT CARD # _____ EXPIRATION DATE (mm/yy) _____ SECURITY
CODE _____

BILLING ADDRESS FOR CREDIT CARD _____

CITY _____ STATE _____ ZIP _____

PHONE _____ EMAIL _____

APPLICANT'S SIGNATURE _____ DATE _____



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PERSONAL INFORMATION OF MARATHON PARTICIPANT

First Name	Middle Name	Last Name
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Street Address (if different from billing address)	Apartment/Unit #
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City	State	Zip
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Email

Gender (M / F)	Shirt Size / Short Size (preference)	Date of Birth
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Occupation	Employer
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Emergency Contact Name	Emergency Contact Phone Number
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How many marathons have you run? _____

Have you ever run the Big Sur International Marathon? _____ If yes, when? _____

What is your predicated time for the 2014 Big Sur International Marathon? __Hr __Min __Sec



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PERSONAL STORY

What sparked your interest to support the Boomer Esiason Foundation and Team Boomer in running the 2014 Big Sur International Marathon?

What is your connection to cystic fibrosis?

Do you have previous experience in fundraising? If so, please tell us about it.

How do you plan on doing fundraising?

What is your fundraising goal?

Any other information you would like to share?