



**OFFICIAL
CHARITY**

Team CRI Commitment Form and Terms and Conditions

Congratulations on your acceptance to the CRI Marathon Team for the 2021 Boston Marathon! Please read the following carefully before signing below.

Fundraising Commitment: Each runner must commit to raising a minimum of \$10,000, in order to join Team CRI. Please refer to all required fundraising commitments below.

In the event that you do not meet the \$3,000 fundraising minimum before Boston Marathon Registration (June 30, 2021), Community Rowing, Inc. will charge the balance owed to your credit card. No exceptions will be made.

In the event that you do not meet the \$5,000 fundraising minimum on Friday, July 30, 2021, one month after registration, Community Rowing, Inc. will charge the balance owed to your credit card. No exceptions will be made.

In the event that you do not meet the \$7,500 fundraising minimum on Monday, August 30th, two months after registration, Community Rowing, Inc. will charge the balance owed to your credit card. No exceptions will be made.

In the event that you do not meet the \$9,500 fundraising minimum on Monday October 4th a week before the race, Community Rowing, Inc. will charge the balance owed to your credit card. No exceptions will be made.

Team fees have been waived. No runner will be charged a team fee.

B.A.A. Registration Fee: Community Rowing will inform you of the details of the B.A.A. registration after your application is accepted. The B.A.A. registration fee for the 2021 Boston Marathon® is **\$395**. **This fee will be paid for by runners and will be deducted from your overall fundraising minimum of \$10,000.** You should not contact the B.A.A. directly to secure your number.

Authorization for Filming/Recording/Interviewing for Fundraising, Public Affairs & Marketing Activities

I agree to be filmed, photographed, videotaped, and/or interviewed relative to my or my child's care and treatment at Community Rowing, Inc. Specifically, I give permission to be filmed, videotaped, photographed and/or interviewed for the following purpose: **Team Community Rowing for the Boston Marathon 2021**

The films, videotapes, photographs and/or interviews are hereafter referred to as the "Product".

I give my consent to allow my name to be used and my identity to be known in the Product.

I understand that I have the right to request cessation of recording or filming at any time and the right to rescind consent upon notice to Community Rowing, Inc. for use of the Product up until a reasonable time before the Product is used.

I have been informed that any films, videotapes, photographs and/or interviews relative to this consent shall not be considered part of my medical record. Such films, video tapes, photographs and/or interviews are the property of Community Rowing, Inc. and may be destroyed at any time at the discretion of Community Rowing, Inc.

I understand that the Product may be generated in conjunction with the news media and /or may be distributed to the news media. I further understand that the Product may be edited as deemed appropriate. In addition, I understand that the Product may be used for publicity and/or informational purposes by Community Rowing, Inc. as Community Rowing, Inc. deems appropriate. I understand that once material is provided to media outlets, Community Rowing, Inc. can no longer control its distribution.

I am aware that I will not receive any financial compensation relative to the Product or its use.

I understand that whether I agree to participate or decide not to participate in the Product, the decision will in no way affect the care or treatment provided to me by the physicians or staff of Community Rowing, Inc.

I hereby release and discharge Community Rowing, Inc., its affiliates and its and their employees, medical staff, directors, officers, agents, successors, assigns, heirs, executors and

licensees from any and all claims and demands arising out of or in connection with the use of the Product in accordance with the terms of this Consent, including but not limited to any claims for defamation, invasion of privacy or infringement of copyrights or moral rights.

I certify that I am of legal age and have read and understand the contents of this Consent.

Name of person: _____

Date: _____ **Signature:** _____

*****FOR COMMUNITY ROWING, INC. OFFICE USE ONLY*****

Name of witness: _____ **Date:** _____

Signature: _____

Release Form and Contribution Agreement: In consideration of my accepting this entry, I hereby for myself, my heirs, executors and administrators, waive and release any and all rights for claims and damages I may have against Community Rowing, Inc., 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 have sufficiently trained 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 waive any compensation for such use. I agree to collect a minimum of \$10,000, which will go towards supporting Community Rowing's mission and para programs, according to the outlined fundraising milestones and completed by ***Monday, October 18, 2021***. If I have not reached the minimum in fundraising by that date, I will personally be responsible for the balance owed. I understand that unless I cancel in writing by ***Monday, May 31, 2021***, Community Rowing, Inc. reserves the right to charge the balance I owe to my credit card. I declare that I have exercised my own judgment in signing this agreement and I further declare that the decision to sign this agreement was voluntary and not based on or influenced by any representation of Community Rowing, Inc.

Allergies to medications: _____

Other Medical Information: _____

Signature: _____

Name (printed): _____

Emergency Contact

The following person should be contacted in the event of an emergency:

Name: _____ Relationship: _____

Telephone Number: _____

Credit Card Authorization Form

Name (printed): _____

Address: _____

City: _____ State: _____ Zip: _____

Credit Card Information:

Credit Card Type (circle one): Visa Mastercard Discover American Express

Card Number: _____ Exp: _____

CVC Number: _____

Name as it appears on card: _____

By signing below, you are agreeing to the Terms and Conditions set forth by Community Rowing as a member of Team CRI. You are agreeing that if the \$3,000 fundraising minimum is not met before Boston Marathon Registration (June 30, 2021), Community Rowing, Inc. will charge the remaining balance to the above card before allowing you to register for the 2021 Boston Marathon. You are agreeing that if \$5,000 is not raised by Friday, July 20, 2021, one month after registration, Community Rowing, Inc. will charge the remaining balance to the above card. You are agreeing that if \$7,500 is not raised by Monday, August 30, 2021, two months after registration, Community Rowing, Inc. will charge the remaining balance to the above card. You are agreeing that if \$9,500 is not raised by Monday, October 4, 2021, a week before race day, Community Rowing, Inc. will charge the remaining balance to the above card. You are agreeing

that CRI will charge the remaining balance of \$10,000 to the above card by Monday, October 18, 2021.

Signature: _____ **Date:** _____

In the Case of Event Cancellation or Postponement

If the Event is cancelled or rescheduled, for any reason, you are still responsible to raise the Fundraising Minimum by the Fundraising Deadline. If the Event is rescheduled or changed to a virtual event, the Fundraising Deadline may be moved at the sole discretion of CRI and is not guaranteed. Deferment. Deferment of the Event entry into any future race or event conducted will not be permitted for any reason. COVID-19 Guidelines. You agree to make all reasonable efforts to adhere to any health guidelines, regulations, and restrictions (including policies regarding masks and social distancing) that may be in place in the location where you complete the Event.

I hereby release CRI and its members, directors, officers, employees, representatives, agents, successors and assigns from any and all present and future claims for any loss, injury, illness (including COVID-19), damage (including real or personal property damage) or liability sustained by me while participating in the Event, whether resulting from negligence, inherent risk of sport or exercise or otherwise, and I hereby waive the right to bring any such claims against CRI's Team and members, directors, officers, employees, representatives, agents, successors and assigns.

I further agree to indemnify and hold harmless CRI's Team and its members, directors, officers, employees, representatives, agents, successors and assigns from and against any and all claims arising from my involvement in the event or incidental thereto, wherever, whenever, and however the claims may arise, including, but not limited to, travel to and from the Event.

I assume all the foregoing risks and accept personal responsibility for any damages and loss following any loss of property, injury, illness (including COVID-19), permanent disability, or death resulting from my participation in the Event.

I have read and fully understand the above waiver, release, and assumption of risk and fully understand that I have given up substantial rights by signing this waiver, release, and assumption of risk, and sign it voluntarily. I agree that any legal claim or dispute arising out of, or in any way relating to my participation in the Event, shall be governed by the laws of the Commonwealth of Massachusetts, USA, and will be adjudicated exclusively by and in, and I hereby submit to the exclusive jurisdiction of, the federal and state courts located in the Boston, Massachusetts, USA.

I certify that I am of legal age and have read and understand the contents of this Consent.

Date: _____ **Signature:** _____