



**Museum of Science®**



Thank you for your interest in becoming a member of the 2012 Museum of Science Boston Marathon® team! This packet contains everything you need to apply to the Museum of Science Team. In order to be considered for our 2012 team, the following must be submitted:

- Completed Application
- Signed Fundraising Agreement
- Signed Emergency Contact/Release and Consent Form

**All completed materials must be received (via mail, e-mail, or fax) by 5 p.m. on Friday, November 4, 2011.**

If you have any questions about this application, please do not hesitate to contact the Museum of Science Boston Marathon Team coordinator at (617) 589-4416 or [marathon@mos.org](mailto:marathon@mos.org).

Once your application has been received, you will receive an e-mail confirmation that will contain further information regarding a phone interview and next steps.

Important dates:

September 12 – November 4, 2011	Application Period
September 12 – November 4, 2011	Phone Interviews
November, 2011	Applicants notified of decision
Late November/Early December, 2011	Team Kick-Off
December XX, 2011	First team training run
January 6, 2012	Deadline to withdraw from team
February 17, 2012	\$2,000 fundraising commitment due
April 6, 2012	\$2,000 fundraising commitment due
<b>April 16, 2012</b>	<b>116<sup>th</sup> Boston Marathon</b>

On behalf of the Museum of Science and the over 100,000 students and community groups Traveling Programs serves each year, the best of luck and thank you for your application!



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# Museum of Science 2012 Boston Marathon® Team Application

Send completed applications to:

**Museum of Science**  
Attn: 2012 Boston Marathon  
1 Science Park  
Boston, MA 02114-1099

**Fax:** (617) 589-4448  
**Email:** [marathon@mos.org](mailto:marathon@mos.org)

**Please print clearly**

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ (Must be 18 years of age or older)

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Employer \_\_\_\_\_ Job Title \_\_\_\_\_

Work Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Work Phone \_\_\_\_\_ Fax \_\_\_\_\_

Preferred Email Address \_\_\_\_\_

I would like to be contacted at:  Home  Work  Cell  Email

Shirt Size  Small  Med  Large  XL

**Fundraising Experience**

Have you participated in a marathon/road race charity program before?  Yes  No

If yes, what was the most recent charity/race? \_\_\_\_\_

Amount raised: \$ \_\_\_\_\_ Date: \_\_\_\_\_

If you are a member of our team, what will your fundraising goal be (minimum required is \$4,000)? \$ \_\_\_\_\_

What is your plan for reaching or surpassing this goal? Please let us know some of the specific actions you intend to take. *We will provide all the support we can to help you, but we also want to see that you have put some thought into how you will reach your personal goal.*

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Does your company have a matching gifts program?  Yes  No

*Many companies match employees' charitable contributions. You can check with your employer to see if your company has this program, and ask donors if their employers match gifts. If you 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 April 6, 2012. If the company's match cycle is past April 6, 2012, the match cannot count towards your minimum.*



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**Running Experience**

This is so we can get to know you better. As long as we know you can complete a marathon without serious health concerns, it doesn't matter whether you are a beginner or an experienced marathon runner.

Have you ever run a marathon before? \_\_Yes \_\_No

If yes, when was the last marathon you ran? \_\_\_\_\_

If no, what is the longest distance you have run? \_\_\_\_\_

What pace do you run a mile (if you know)? \_\_\_\_\_

If you are a member of the Museum of Science team, would you like to have weekly training runs with the rest of the team or would you prefer training on your own? *You will be required to attend two of the first three team training runs, which will occur on Saturdays in December.*

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In terms of training and coaching, what would you like to see the Museum of Science provide? We want to know what you are looking for in a team so we can provide the services that our team members want and need.

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**Connection to the Museum of Science**

How did you learn about the Museum of Science and Traveling Programs?

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Have you had any previous experience with the Museum of Science or Traveling Programs? \_\_Yes \_\_No

If yes, please explain

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Please describe why you would like to run for the Museum of Science?

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Are you applying to any other 2012 Boston Marathon Charity groups? \_\_Yes \_\_No

If Yes, which one(s)? \_\_\_\_\_

What other community organizations are you involved with? Other current fundraising commitments?

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The Museum of Science plans to hold team meetings during training. These will most likely be on Saturdays after a group run. We will have exact dates in early November. Do you foresee any conflicts with these meetings?

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Is there anything else you would like us to know?

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## Museum of Science Terms and Conditions for the 2012 Boston Marathon® Charity Program

Please read the following carefully before signing below.

### Fundraising Commitment

A minimum donation of **\$4,000** is required to join the Museum of Science marathon team. This **\$4,000** minimum *does not* include the **\$300** individual entry fee that every runner on the Museum of Science Marathon Team must pay to the Boston Athletic Association. The Museum of Science will inform you of the details of the B.A.A. registration after your application is accepted. This fee will be collected separately at a later date. You should **NOT** contact the B.A.A. directly to secure your number.

In the event that you do not meet the minimum donation requirement by **April 6, 2012**, the Museum of Science reserves the right to charge the balance owed to your credit card, unless prior arrangements have been made. Visa, MasterCard and American Express are accepted. If you continue to fundraise after your credit card has been processed with the remaining balance, we will reimburse your card upon written request. We will not reimburse your card past May 1, 2012.

Upon acceptance to the Museum of Science marathon team, you will be required to provide a valid credit card that we will hold on file until **April 6, 2012**.

A non-refundable team fee of **\$100** will be charged to your credit card once you are accepted onto the team. The **\$100 does not** go toward your **\$4,000** fundraising minimum and is **in addition** to the **\$300** entry fee required by the B.A.A.

Please remember, in the event that you do not meet the minimum donation requirement by **April 6, 2012**, the Museum of Science reserves the right to charge the balance owed to your credit card, unless prior arrangements have been made.

### Cancellation Policy

You may cancel your participation with the Museum of Science team for the Boston Marathon, waiving your responsibility for the **\$4,000** minimum, anytime on or before **Friday, January 6, 2012**. To do so you must contact Lindsey Davis at the Museum of Science, in writing, on or before the cancellation date. Your \$100 team fee is non-refundable. **After January 6, you are responsible for raising the \$4,000 minimum, even if for any reason, including injury, you are unable to run in the Marathon.**

Donations raised and received by our office will not be refunded, even if you leave the team before **January 6, 2012**.

Signature \_\_\_\_\_

Name (printed) \_\_\_\_\_



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**Emergency Information**

In the event of an illness, injury or medical emergency arising during the event or in the training and planning sessions for said event, I hereby authorize and give my consent to the Museum of Science to secure from any accredited hospital, clinic and/or physician any treatment deemed necessary for my immediate care. I agree that I will be fully responsible for payment of any and all medical services and treatment rendered to me including but not limited to medical transport, medications, treatment, and hospitalization. The following person should be contacted in the event of an emergency:

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Telephone Number \_\_\_\_\_

Allergies to medications \_\_\_\_\_

Other Pertinent Medical Information \_\_\_\_\_

**Release Form and Contribution Agreement**

As a member of the Museum of Science 2012 Boston Marathon team, I agree to pay a non-refundable, non transferable, non-fundraising race registration fee of **\$300**, a team fee of **\$100**, and to collect a fundraising minimum of **\$4,000** for the Museum of Science in support of the Museum of Science Traveling Programs whether or not I run the race. The deadline for the Museum of Science's receipt of the fundraising minimum amount is **April 6, 2012**. I authorize the Museum of Science to immediately charge my credit card provided at the time of my acceptance of an invitation to join the team for my **\$100** team fee, and on **April 6, 2012** for any balance due to meet the fundraising minimum.

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 Museum of Science, 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, and a licensed medical doctor has verified my physical condition. 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 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 the Museum of Science.

Signature \_\_\_\_\_

Name (printed) \_\_\_\_\_

**Thank you for your application to join the Museum of Science 2012 Boston Marathon Team!**