

Chevron Houston Marathon _____



Aramco Houston Half Marathon _____

2016-2017 "Fundraising for Registration" Guaranteed Race Entry Commitment & Credit Card Authorization Form

I am committing to raise funds for <u>Buffalo Bayou Partnership (BBP)</u> for their 2016-2017 Run for a Reason campaign and to secure a guaranteed race entry into the 2017 Chevron Houston Marathon or Aramco Houston Half Marathon.

After I pay the race registration fee, raise and submit the minimum fundraising amount, indicated below, I will be guaranteed a 2017 race registration into (check race below):

In the event the minimum amount is not raised by date due to be registered (Monday, November 28, 2016), I understand that I will be required to pay the remaining balance to reach this minimum goal. I permit BBP to charge my credit card the remaining amount to be fundraised.				
I understand BBP will provide me with guaranteed race registration information and I will register for the race <u>no later than</u> December 2, 2016 or my race registration will be forfeited and no refund shall be given.				
If I am unable to participate in the 2017 event, for any reason, I understand that no refunds will be given, all money raised will remain with BBP and will not be counted toward a future race entry.				
I understand there will be no refunds for any reason. If I am, for any reason, unable to participate in the 2017 event, all money raised will remain with BBP and cannot be counted toward a future race entry.				
Chevron Houston Marathon				
Total minimum fundraising amount for Marathon:	\$500.00			
Race registration fee for the Marathon:	\$135.00			
Minimum amount due to be registered (Nov. 28)	\$400.00			
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Aramco Houston Half Marathon				
Total minimum fundraising amount for Half Marathon:	\$500.00			
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Race registration fee for the Half Marathon:	\$ <u>115.00</u>			
Minimum amount due to be registered (Nov. 28)	\$400.00			
Credit Card Type: (please circle one): VISA / MASTERCARD / AMEX / DISCOVER				
Credit Card Number:	Expiration:		Security Co	de:
Dilling Address				
Billing Address: Street Address		City	 State	Zip Code
Street Address		City	State	zip code
Name (as it appears on the card):				
Email Address:				
Primary Phone Number:	Secondary Phone Number:			
Signature:	Date:			