



**2016-2017 “Fundraising for Registration” Guaranteed Race Entry Commitment & Credit Card Authorization Form**

I am committing to raise funds for **The Montrose Center** (“Charity”) 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):

Chevron Houston Marathon \_\_\_\_\_ Aramco Houston Half Marathon \_\_\_\_\_

In the event the minimum amount is not raised by **November 18**, I understand that I will be required to pay the remaining balance to reach this minimum goal.

I permit Charity to charge my credit card the remaining amount to be fundraised. I understand Charity will provide me with guaranteed race registration information and I will register for the race no later than 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 the Charity 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 the charity named above and cannot be counted toward a future race entry.

Chevron Houston Marathon

Minimum fundraising amount for Marathon: **\$600.00**  
Capitalized Discounted Registration for Marathon: ~~\$135.00~~ **\$50.00** (The Montrose Center will pay remaining \$85.00)  
Total minimum amount due: **\$650.00**

Aramco Houston Half Marathon

Minimum fundraising amount for 1/2 Marathon: **\$ 600.00**  
Capitalized Discounted Registration for 1/2 Marathon: ~~\$115.00~~ **\$50.00** (The Montrose Center will pay remaining \$65.00)  
Total minimum amount due: **\$650.00**

Credit Card Type: (please circle one): VISA / MASTERCARD

Credit Card Number: \_\_\_\_\_ Expiration: \_\_\_\_\_ Security Code: \_\_\_\_\_

Billing Address: \_\_\_\_\_  
**Street Address City State Zip Code**

Name (as it appears on the card): \_\_\_\_\_

Email Address: \_\_\_\_\_

Primary Phone Number: \_\_\_\_\_ Secondary Phone Number: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_