



2016 TCS New York City Marathon

Thank you for registering with the **Migraine Research Foundation** for the 2016 **TCS New York City Marathon** on November 6, 2016. **MRF** has a limited number of **guaranteed entries** available. Places are awarded on a first-come, first-served basis to qualified applicants who will be 18 by the day of the race.

Please fill out and sign the registration form, then scan and email it to **djoyce@MigraineResearchFoundation.org** or fax to **212-249-5405**. If **MRF** accepts your application, a \$100 deposit will be charged to your credit card. This fee will be considered your first donation toward your minimum \$2,500 fundraising pledge. If we do not receive a minimum of \$2,500 in donations made in your name by October 30, 2016, **MRF** will charge the remaining balance to your credit card. If for some reason **MRF** is unable to charge your card, we reserve the right to cancel your entry.

You are responsible for paying all processing and entry fees for the 2016 **TCS New York City Marathon**. These fees do not count toward your fundraising commitment. Please note that a place on **TEAM MRF** is non-transferable. All donations are non-refundable. Through **MRF**, you have access to the NYRR's online Virtual Training Program at no additional cost.

Please email Danielle at **djoyce@MigraineResearchFoundation.org** or call **MRF** at **212-249-5402** with any questions. Sign here to acknowledge and agree to these terms and conditions:

SIGNATURE

DATE

First Name: _____	Last Name: _____			
Mailing Address: _____				
City: _____	State: _____	Zip: _____	Country: _____	
Preferred Phone: _____	Preferred email: _____			
Date of Birth: _____				
Name on Credit Card: _____				
Credit Card Number: _____				
Credit Card Type (circle):	AmEx	Visa	MC	Discover
Expiration Date: _____	Security code: _____			