

Team Metro Housing
Boston's Run to Remember
Memorial Day: Monday, May 27, 2024
DISTANCE: 13 Miles (Half Marathon) or 5 Mile Race
ENDING HOMELESSNESS BEGINS WITH YOU

Metro Housing is pleased to announce that **Team Metro Housing** is now an official charity partner of [Boston's Run to Remember](#). Taking place on Memorial Day Weekend, **Boston's Run to Remember** honors the service of fallen 1st Responders and has over 10,000 runners, representing all 50 states. Team Metro Housing has had runners compete and raise funds through other road races since 2006 and has raised over \$660,000 to help prevent families and individuals, throughout Greater Boston, from becoming homeless and transition to stability.

Metro Housing is a leading nonprofit with over 35 years' experience connecting the residents of Greater Boston with safe, decent homes they can afford. Metro Housing is also the state's largest regional provider of rental assistance, serving persons with disabilities or mental illness, the elderly, and households with very low incomes in Boston and 29 surrounding communities. The financial support we receive from the Boston's Run to Remember charity program ensures that we continue providing services to those who need our help.

Benefits of being a member of Team Metro Housing:

- Team meetings and support.
- Fundraising assistance and promotional/information materials about Metro Housing.
- Registration fee is **FREE** for Team Metro Housing runners (*with special code*)
- Personalized fundraising page.
- Team Gear and Incentive awards for achieving fundraising goals.

Application process:

1. Prospective runners complete the application, which includes questions about running experience, fundraising experience, and their desire to run for the Metro Housing team.
Application available by emailing rebecca.hasko@metrohousingboston.org
2. Runners sign off on selection and participation criteria.
3. All applications are due by **Thursday, January 31, 2024 at 5:00pm.**

Questions? Contact Rebecca Hasko, rebecca.hasko@metrohousingboston.org, 617-425-6632

Release Form

Release form: In consideration of my accepting this entry, I hereby for myself, my heirs, executor and administrators, waive and release any and all rights for claims and 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 so 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 wear the designated/assigned Metro Housing-branded gear on race day.

I understand that if I cancel without approval I will be charged \$100 fee. 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 Metro Housing.

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 Metro Housing 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.

I understand and agree to the release form. ☐ Yes ☐ No

Signature of application: _____ Date: _____

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

Emergency contact (1): _____ Relationship: _____

Telephone number: _____ Email: _____

Emergency contact (2): _____ Relationship: _____

Telephone number: _____ Email: _____

Medical allergies: _____

Application for the 2024 Team Metro Housing

All pages of the application should be completed and returned by **January 31, 2024**.

Answers can also be submitted in a Word document.

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home phone: _____ Cell phone: _____

Email address: _____ Date of birth: _____

Employer: _____ Work phone: _____

Work address: _____

City: _____ State: _____ Zip: _____

How would you prefer to be contacted: ☐ Home phone ☐ Cell phone ☐ Work phone ☐ Email

***PLEASE INCLUDE A PHOTO OF YOU WITH THIS APPLICATION (Preferably in running gear)**

Running experience

Are you an active runner? ☐ Yes ☐ No

Is this your first race? ☐ Yes ☐ No

Have you ever ran a marathon, half-marathon, or another race charity program? ☐ Yes ☐ No

If yes, when and where was the race? _____

How many races have you done so far? _____

Fundraising Experience

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

If yes, for which charity and how much money did you raise?

Charity Name: _____ Amount raised: \$ _____

Charity Name: _____ Amount raised: \$ _____

What will your fundraising goal be for the Metro Housing team? \$ _____

Do you have any fundraising experience? ☐ Yes ☐ No

If yes, please describe.

Please describe specific plans for how you will achieve your fundraising goal.

Are you affiliated with other organizations that plan to support Team Metro Housing through corporate sponsorship, fundraising events or other activities? ☐ Yes (list below) ☐ No

Does your company have a matching gift program? ☐ Yes ☐ No

Does your company have a corporate sponsorship program? ☐ Yes ☐ No

Are there any specific ways Metro Housing can support you to help you achieve your fundraising goal?

Please answer the following questions so that we can get to know you a little better.

How did you learn about the Team Metro Housing program?

What other community organizations are you involved with, and in what capacity?

Please describe why you would like to join Team Metro Housing.

Is there anything else you would like us to know about you; experiences that inspire you, achievements, goals?

Do you see yourself becoming involved with Metro Housing after the race? ☐ Yes ☐ No

If yes, please describe.

Raising Awareness

Do you use social media? Check all that apply:

☐ Facebook (Don't forget to "like" us! www.facebook.com/metrohousingboston)

☐ Twitter (handle: @_____) (Follow us! www.twitter.com/metrohousingbos)

☐ Instagram (handle: @_____) (Follow us! www.instagram.com/metrohousingboston)

☐ Personal blog (URL: _____)

☐ Other: _____

How will you use social and other media to raise awareness about your racing with Team Metro Housing?

During the training period, Metro Housing will support you in reaching out to media outlets who may be interested in covering your story. To assist in this, please tell us the following:

Hometown newspaper(s): _____

Alma mater(s): _____

Do you have any contacts in the media? If so, please supply name and media outlet below. _____

My Unisex Shirt Size: ☐ X-Small ☐ Small ☐ Medium ☐ Large ☐ X-Large

My Team Metro Housing Singlet size:

- | | |
|----------------------------------------|------------------------------------------|
| <input type="checkbox"/> Men's Small | <input type="checkbox"/> Women's Small |
| <input type="checkbox"/> Men's Medium | <input type="checkbox"/> Women's Medium |
| <input type="checkbox"/> Men's Large | <input type="checkbox"/> Women's Large |
| <input type="checkbox"/> Men's X-Large | <input type="checkbox"/> Women's X-Large |

All pages of the application should be completed and returned with a photo by **January 31, 2024 at 5:00pm to rebecca.hasko@metrohousingboston.org**. The answers can also be completed in a Word document.

Please submit completed applications with a photo electronically to:

Metro Housing|Boston

Attn: Rebecca Hasko, Director of Fundraising & Outreach

Email: rebecca.hasko@metrohousingboston.org