



**STOKED MENTORING  
NEW YORK CITY MARATHON 2010**

Stoked Mentoring is a non-profit youth development organization with the mission of developing Successful Teens with Opportunity, Knowledge, Experience, and Determination through the use of action sports, mentoring, and coaching. Stoked provides life coaching to at-risk teenagers in New York and Los Angeles through surfing, skateboarding, and snowboarding. For more information about Stoked Mentoring, please visit our website <http://stoked.org>. Stoked is a registered 501(c)(3).

**About TEAM STOKED:**

TEAM STOKED is a group of adults who pro-actively support and help the Stoked Mentoring Mission grow. TEAM STOKED is for active adults who participate in various community athletic events and are willing to fundraise for Stoked while doing so.

**TEAM STOKED REGISTRATION FORM**

100% of all donations directly benefit the at-risk youth in our programs.

TITLE: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/STATE/ZIP CODE: \_\_\_\_\_

TEL( )/FAX( ): \_\_\_\_\_

E-MAIL: \_\_\_\_\_

**Fundraising Commitment Form**

Applicants for guaranteed entry in the **ING NEW YORK CITY MARATHON** on Sunday, November 7, 2010 must pledge to obtain donations from third parties or personally donate a total of a minimum of US \$2,000 to Stoked Mentoring, Inc. Applicants will be required to provide their credit card information as a guarantee against his/her pledge. Stoked Mentoring, Inc. must receive the full amount (\$2,000) from accepted applicants and/or third party donors by Sunday, November 7, 2010. If Stoked Mentoring Inc. has not received the full amount, the accepted applicant's credit card will be charged on that date for the outstanding amount necessary to fulfill his/her minimum pledge. If the participant cannot participate in the event for any reason (unexpected conflict, injury, etc.) the full amount of US \$2,000 is still due to Stoked Mentoring, Inc. Each participant is responsible for payment of his/her individual NYRR registration fee of \$160 for NYRR members and \$196 for non-members (inclusive of \$11 processing fee).

Signed Name: \_\_\_\_\_ Date: \_\_\_\_\_

Name on Card: \_\_\_\_\_

Type of Card: \_\_\_\_\_

Card Number: \_\_\_\_\_

Exp. Date: \_\_\_\_\_ CVC#: \_\_\_\_\_

Billing Address: \_\_\_\_\_

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

Phone: \_\_\_\_\_

**When done, please Mail to the address below or Fax to: 212-859-7357**