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Dear Prospective Guide,

First off, I would personally like to thank you for getting involved with Achilles International and filling out an application to be a Guide in the upcoming 2010 ING NYC Marathon.

Your energy and commitment to our athletes is no small task (especially not for 26.2 miles!!) and their marathon experience would not be the fulfilling and life altering experience if it were not for your assistance.

Please fill out the Guide Application to the best of your ability and email (rkoplin@achillesinternational.org), fax (212-354-3978) or snail mail it back to me (Achilles International, c/o Russell Koplin, 42 West 38th Street, 4th floor, NY NY 10018) at your earliest convenience. *The Deadline for Applications is Wednesday, September 1, 2010.*

Please note that I am the only person who matches the athletes and guides together. It is an arduous task that takes time and requires detailed attention to an athlete's specific needs (be it medical, physical or even linguistically). I realize your training takes physical dedication as well as time so I will let you know if and how we are going to use you as soon as I am able. I have complete respect for what you are volunteering to do and I want to honor the pledge you are willing to make to our athletes. That being said, I hope you will do the same and let me know as soon as possible if for some reason you will no longer be able to participate as a guide.

If you have not heard from me by September 20th and you are beginning to feel anxious please feel free to check in with me.

One last thing, please note that participating as a guide in the marathon is a volunteer position. You do not need to pay any sort of registration fee to be a part of this program. However, during these challenging economic times everyone is being hit from all sides and a small non-profit like Achilles is no exception. We are encouraging our

Guides to please consider raising money in whatever way they are able to help underwrite an Achilles Athlete's Marathon Registration. Any and every little bit you can contribute makes a huge difference! Achilles does its absolute best to subsidize the entries of all of our athletes who need assistance and your fundraising efforts are a huge help!! The Entry fee for a National Athlete is \$196 and for an International Athlete it is \$276. Thank you in advance for your hard work and perseverance on behalf of our athletes and please remember that your contribution is 100% tax deductible.

I very much look forward to working with you on this year's NYC Marathon and sharing what is sure to be an incredibly challenging yet inspirational experience.

Sincerely and with Appreciation,
Russell Koplin

Miss Russell Koplin
Volunteer Coordinator and Project Manager
Achilles International
42 West 38th Street, 4th floor
New York, NY 10018

Phone: 212-354-0300
Fax: 212-354-3978
Email: rkoplin@achillesinternational.org

Guide Application

ING New York City Marathon • Sunday, November 7, 2010

Please print and complete this application if you will be accompanying a disabled entrant as a volunteer guide in the ING New York City Marathon.

This application must be received by Achilles International by Wednesday, September 1, 2010.

Serving as a guide for a disabled entrant is a serious responsibility. In recognition of the important role they play, guides will be permitted to participate in the marathon free of charge. Guides, along with their assigned athletes, will be transported by bus to the starting line of the marathon. Guides **must** be at least 18 years old on race day and **must** be capable of completing the entire 26.2-mile marathon distance. Additional information about the responsibilities of the guides, and about their participation in the marathon, will be available on www.ingnycmarathon.org after August 31, 2010.

| | | | |
|--------------------------|-----------------------|---------------------------------------|---------------------------------|
| *Family Name | | *Given Name | |
| Age on Race Day | Birth Date (mm/dd/yy) | Gender: <input type="checkbox"/> Male | <input type="checkbox"/> Female |
| Home Address | | City | |
| State or Region/Province | | Zip/Postal Code | Country |
| Daytime Tel. | Cell | Fax | Email Address |

If you already know the name of the disabled marathoner you will be accompanying in the ING New York City Marathon, please state his/her name below:

| | |
|---|---|
| *Family (surname) Name of Entrant | *Given Name of Entrant |
| Are you that person's only guide? <small>*If no, what is/are the name(s) of other guide(s), if known? (list below)</small> | <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> DO NOT KNOW |

| | |
|---|---|
| Do you know the nature of your athlete's disability? <small>*If yes, please briefly describe: (we will keep this sensitive information strictly confidential in our files)</small> | <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> DO NOT KNOW |
|---|---|

| | |
|-----------------------|--|
| Do you speak English? | <input type="checkbox"/> YES <input type="checkbox"/> NO |
|-----------------------|--|

| | |
|---|--|
| Do you speak any other languages? <small>Which ones, if any? _____</small> | <input type="checkbox"/> YES <input type="checkbox"/> NO |
|---|--|

What is your estimated time for completing the marathon distance? _____ hrs _____ min

| | |
|--|---|
| Have you previously acted as a guide for a disabled athlete in the ING New York City Marathon? | <input type="checkbox"/> YES <input type="checkbox"/> NO <small>If yes, when? _____</small> |
|--|---|

| | |
|---|--|
| Have you ever acted as a guide in another marathon or race? <small>If yes, when and where? _____</small> | <input type="checkbox"/> YES <input type="checkbox"/> NO |
|---|--|

| | |
|-----------------------------------|---|
| Shirt Size (in unisex Tech Shirt) | <input type="checkbox"/> Small <input type="checkbox"/> Medium <input type="checkbox"/> Large <input type="checkbox"/> XL |
|-----------------------------------|---|

Guide experience includes (check all that apply): Please add any relevant notes or comments on back of this application.

| | | | | | |
|--|---|--|---|---------------------------------|------------------------------------|
| <input type="checkbox"/> Visually Impaired | <input type="checkbox"/> Deaf | <input type="checkbox"/> Amputee | <input type="checkbox"/> Cerebral Palsy | <input type="checkbox"/> Stroke | <input type="checkbox"/> Paralysis |
| <input type="checkbox"/> Wheelchair (over 4 hrs) | <input type="checkbox"/> Handcrank (over 4 hrs) | <input type="checkbox"/> Other (Please specify: _____) | | | |

ACKNOWLEDGEMENT AND WAIVER: I understand that being a guide for the ING New York City Marathon is a serious responsibility and privilege. I have trained and am in good physical condition. If I am confirmed as a guide, I agree to dedicate my time and energy to the athletes with disabilities and the Achilles Track Club during the marathon weekend, including an orientation that reviews my expectations on race day. I know that participating as a guide in the ING New York City Marathon (the "Event") is a potentially hazardous activity. I should not enter and participate unless I am medically able and properly trained. I agree to abide by any decision of a race official relative to my ability to safely complete the Event. I assume all risks associated with participating in the Event, including, but not limited to, falls, contact with other participants, the effects of the weather, including high heat and humidity, traffic, and the conditions of the road, all such risks being known and appreciated by me. I grant the Medical Director of the Event and his designee access to my medical records and physicians, as well as other information relating to medical care that may be administered to me as a result of my participation in the Event. Having read this waiver and knowing these facts and in consideration of your accepting my application, I for myself and anyone entitled to act on my behalf, waive and release any and all organizers and sponsors of the Event including, but not limited to, the New York Road Runners, Inc., Road Runners Club of America, Achilles Track Club, all Event sponsors and all of their agents, representatives, and successors, from all claims or liabilities of any kind arising out of my participation in the Event even though the liability may arise out of negligence or carelessness on the part of the persons named in this Waiver. I grant permission to all of the foregoing to use or authorize others to use any photographs, motion pictures, recordings, or any other record of my participation in the Event for any legitimate purpose without remuneration to me.

| | |
|-----------|------|
| Signature | Date |
|-----------|------|

Please mail completed application to Achilles International, 42 West 38th Street, 4th Floor,
NY, NY 10018, ATTN: New York City Marathon Coordinator.

Or submit via fax to Achilles at (212) 354-3978.

*Marathon entrant **must** complete this information before giving the application to the guide.

This application will not be accepted unless this information is provided.



