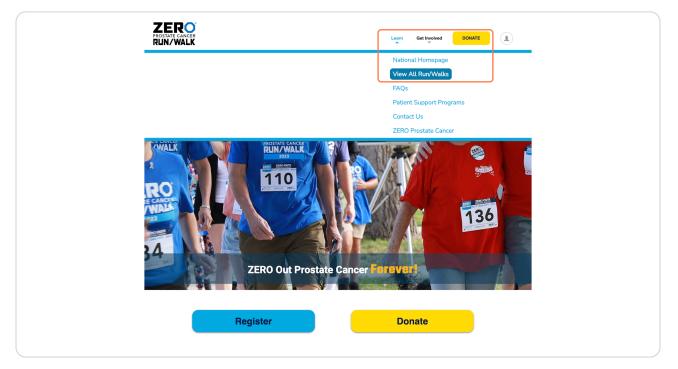
How to Register for The ZERO Prostate Cancer Run/Walk Step-by-Step Guide



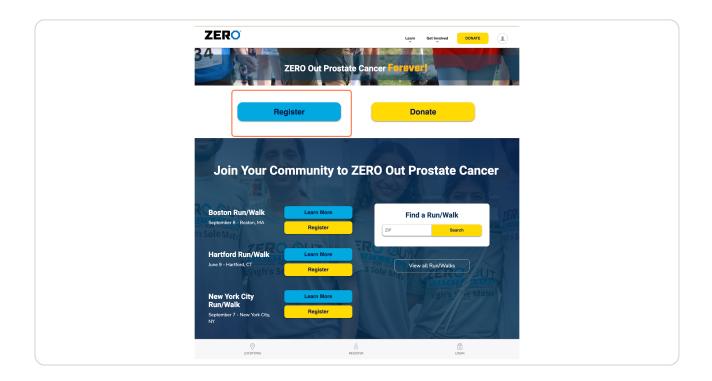
Visit zerocancer.run, click "Get Involved, then click "View All Run/Walks" for a complete list of Run/Walks.

Alternatively, find a specific Run/Walk city by typing zerocancer.run/CITY



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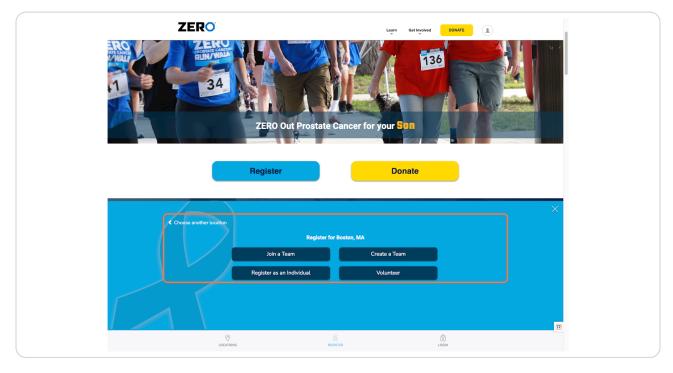
On the main zerocancer.run page, scroll down, click on the blue "Register" button.



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Once you click register, this will open to multiple registration options underneath. Select your registration type from the options provided.

Here, you can search for and choose an alternative location before selecting an option by clicking "Choose another location".



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Once you have selected your registration type, you will be taken to a login page.

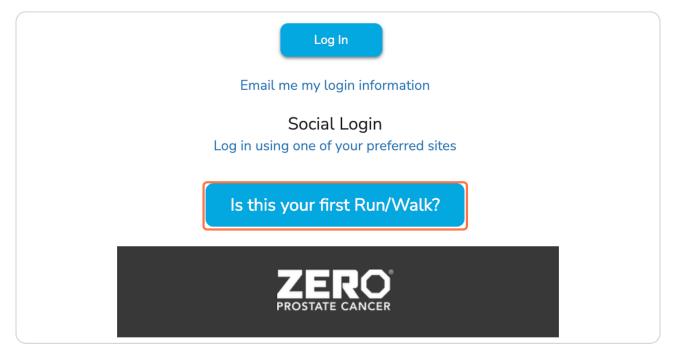
If you have previously participated in a Run/Walk, complete your login details or select "Email me my login information." Skip to step 8.

If you are new to our Run/Walk, please continue with the following steps.

ITE CANCER VMALK Learn Get Involved DOMATE
Boston Run/Walk
Help support patients in need. Fundraise to end prostate cancer!
hy do I need to register or log in?
e going to have your very own Fundraising HQ: a dashboard where you can see everything donated on your behalf, send thank you Is and updates to friends and family, customize your personal page, manage team membership, and more. We'll also use the details to along anything you'd need for taxes, record keeping, fundraising incentives, etc.
Have you participated in a Run/Walk before?
User Name:
Password:
Log In
Email me my login information
Social Login Log in using one of your preferred sites
Is this your first Run/Walk?
P. 202-301-3110
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Click on "Is this your first Run/Walk?"



STEP 6

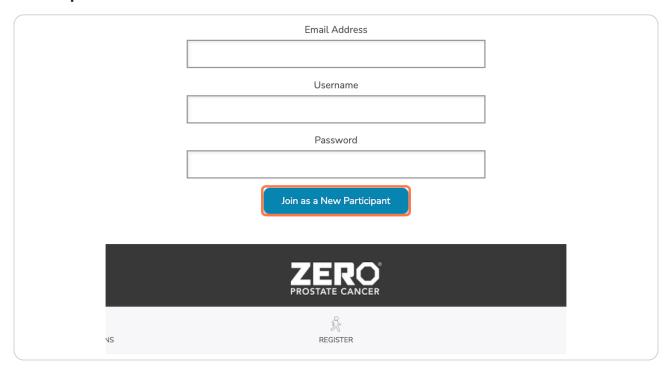
Fill out your contact information.

Help suppor	rt patients in need. Fundraise to end pro	state cancer!	
Why do I need to reg	gister or log in?		
emails and updates to friends and fami	draising HQ: a dashboard where you can see everything dona ly, customize your personal page, manage team membership, a es, record keeping, fundraising incentives, etc.		
	Have you participated in a Run/Walk before?		
	Is this your first Run/Walk?		
	First Name	1	
	LastNava		
	Last Name]	
	Email Address	-	
]	
	Username	1	
	Password]	
]	
	Join as a New Participant		
	Register	() LOGIN	



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Once you have filled out your information, click on "Join as a New Participant."



Are you starting a team or joining an existing team? Follow the next step. If you are an individual participant, skip to step 9.

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If you are a team captain or member, once you register, you will be asked to type in your team name and team fundraising goal.

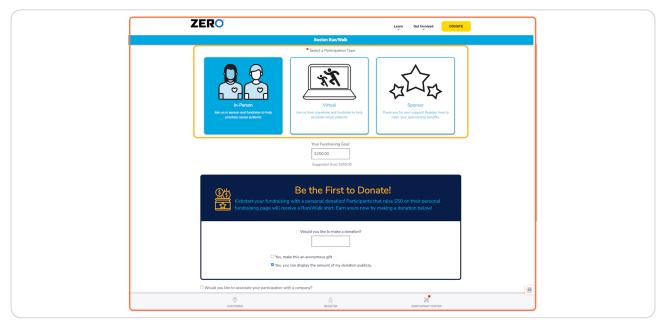
To join an existing team instead, click "Join a Team." This will bring you to a new page where you can search for your desired team. Once complete, continue onto the next steps.

He	lp support patients	s in need. Fundraise to $3 - 2 - 3 - 4 - 5$	end prostate cancer!	
* Team Name:				
Team Fundraising Goal:	1			
	0.00	s can skip this step):		
 select an option Enter a new comp 				
				Next Step
	iol	oin a Team Register as an Individual		

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Great! On the next page you can select your participation type.

You can participate virtually or in person. Are you a sponsor? Select the Sponsor icon.

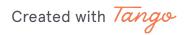


STEP 10

Adjust your fundraising goal.

There is no registration fee. You can adjust this quantity as you would like.

	Your Fundraising Goal: \$250.00 Suggested Goal: \$250.00	
Be	e the First to Do	onat



9 of 18

If you are part of a large organization that has sponsored, you can attach your registration to your company with the "Would you like to associate your participation with a company?" option.

Kickstart your fundraising with a personal donation! Participants that raise \$50 on their personal fundraising page will receive a Run/Walk shirt. Earn yours now by making a donation below!
Would you like to make a donation?
Yes, make this an anonymous gift.
Yes, you can display the amount of my donation publicly.

STEP 12

Select the company from the existing options or enter a new company.

	 Yes, make this an anonym Yes, you can display the a
 ✓ Wc ● ● 	Zero Prostate Cancer ~ Enter a new company



Once complete on this page, click on next step.

/ /	Vould you like to make a donation?	
	play the amount of my donation publicly.	
	Next Step	
	PROSTATE CANCER	

STEP 14

This will open a pop-up box, asking if you would like to add a self-donation. Select your desired option.

This is optional. There is no registration fee.

	n Add a self-donation? Will you make a donation today to help the many families in our community that have been impacted by prostate cancer?	Get Involved DONATE	
	DONATE NOW! No Thanks Donate \$25 Donate Other		
	Be the First to Donate! tart your fundraising with a personal donation! Participants that raise \$50 or aising page will receive a Run/Walk shirt. Earn yours now by making a dona		
	Would you like to make a donation?		
	Yes, make this an anonymous gift. Yes, you can display the amount of my donation publicly.		
Would you like to associate the second se	iate your participation with a company?		



On the next page, you will be asked to review or fill out your contact information.

ZERO		earn Get In	nvolved DONATE	
	Boston Run/Walk			
Help support patients in	need. Fundraise to end prost	ate cance	er!	
	0-2-3-6			
	Registration			
			Micates Required	
Please complete the registration form below				
Personal Information				
* First Name	* Last Name		7	
John	Appleseed			
* Gender				
* Date of Birth:				
Month Day Year Month J Day Year				
Employer				
Contact Information				
* Street 1	Street 2		_	
Street 3	* City			
	•			_
* State / Province	* ZIP / Postal Code		*	1
LOCATIONS	ैर्द REGISTER		PANT CENTER	

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Fill out your emergency contact.

This ensures we have a person to contact in case of emergencies on the event day.

LERV	Learn Get Involved
	ston Run/Walk
* Street 1	Street 2
Street 3	City
* State / Province	ZIP / Postal Code
~	
* Country	
~	
* Email	Mobile Phone Number
samantha.garcia@zerocancer.org	
autorities and a second second	
Emergency Contact:	
Emergency Contact Name	Emergency Contact Phone
I would like to be emailed when a gift is made on my behalf.	
Additional Information	
••••	
*1. How are you connected to prostate cancer?	
1. How are you connected to prostate cancer? Please select response	
Please select response \checkmark	
Ptease select response	on form? Complete the phrase "I fundraise because"
Please select response Please select response Please select response Please select response	ion form? Complete the phrase "I fundraise bocause*
Please select response Please select response Please select response Please select response	Con Form? Complete: the phrase "I fundhelies because"

STEP 17

Answer required questions under "Additional Information".

Required questions are denoted with an asterisk*

ZERO	Learn	Get Involved	DONATE
Bo	ton Run/Walk		
Additional Information			
*1. How are you connected to prostate cancer?			
Please select response ~			
* 2. Which of the following best describes you?			
Please select response V			
 What personal message would you like to add to your page's donat 	on form? Complete the phrase "I fundraise because	e"	
(Maximum response 255 chars, approx. 5 rows of text)	li li		
*4. Are you of Hispanic, Latino, or Spanish decent?			
Please select response 🗸			
* 5. Are you a U.S. military Veteran?			
Please select response 🗸			
 If you are a veteran, are you currently on active duty? 			
Please select response \checkmark			
7. Participants who raise \$50 are eligible to receive a Run/Walk shirt. I prostate cancer will receive a special event shirt regardless of fundr		vivors and those liv	ing with
Please select response $\qquad \checkmark$			
 Would you be interested in joining the Run/Walk Planning Committee 	e?		
Please select response 🗸			
9. Are you bringing children (11 and under) that would like to participa	te in the kids dash? If yes, how many?		
* 10. Please take a moment to read the <u>Run/Walk participant waiver</u>			
©	ŝ	×	



13 of 18

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STEP 18
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Check "I agree with the terms and conditions of the Run/Walk participant agreement.

Please select response V
9. Are you bringing children (11 and under) that would like to participate in the kids dash? If yes, how i
* 10. Please take a moment to read the <u>Run/Walk participant waiver</u> .
I agree with the terms and conditions of the Run/Walk participant agreement.
11Do you agree to the Run/Walk Waiver on behalf of any children that will participate in the Kid's Das
I agree on behalf of all child participants associated with my registration.
* 12. Please take a moment to read the <u>Standards of Excellence Policy</u>
□ I agree to comply with the ZERO Prostate Cancer Standards of Excellence Policy.
Previous Step

STEP 19

Check "I agree to comply with the ZERO Prostate Cancer Standards of Excellence Policy."

* 10. Please take a moment to read the <u>Run/Walk participant waiver</u> .
I agree with the terms and conditions of the Run/Walk participant agreement.
11Do you agree to the Run/Walk Waiver on behalf of any children that will participate in the Kid's Das
I agree on behalf of all child participants associated with my registration.
*12. Please take a moment to read the <u>Standards of Excellence Policy</u>
I agree to comply with the ZERO Prostate Cancer Standards of Excellence Policy.
Previous Step
ZERO PROSTATE CANCER
P: <u>202-303-3110</u>



Click on next step

:he Kid's Dash?	
Next Step	

Pause. Did you ensure all your information was filled out and spelled correctly? Please proofread before proceeding.

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15 of 18

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On the last page, confirm your contact information is correct.

You have the option to register an additional person before completing your registration.

CERO° OSTATE CANCER UN/WALK		Learn Get Involved DONATE
	Boston Run/Walk	
Help support	patients in need. Fundrais	se to end prostate cancer!
	1 -2- <u>3</u> -4	
	Registration Sum	mary
You have configured 1 registration.		
Samantha Garcia		
samantha.garcia@zerocancer.org 515 King St, Ste 420 Alexandria, VA 22314-3137	Participation Type: In-Person	\$0.00
[Edit]	Extra Gift:	\$25.00
		Participant Total: \$25.00
The current total cost is		\$25.00
Cancel		Register Additional Person Complete Registration

Registering family members, children, friends, and more? This is your opportunity. Before completing your registration, click "Register Additional Person" and follow the steps. Once you have followed the steps and are ready to finish the registration process, click "Complete Registration."

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On the next page, you will be shown a thank you page.

ZERO		Learn Get Involved	DONATE			
Boston Run/Walk						
Thanks for Registering						
	Thank you for registering for Boston Run/Walkl A confirmation email has been sent to samantha.garcia@zerocancer.org.					
Start fundraising today with your Participar Access your Participant Center	nt Center!					
Transaction Summary						
Total Purchase Amount:		\$0.				
Fair Market Value: Tax Deductible Value:			0.00			
Tracking Code:						
Registration Summary						
Samantha Garcia						
samantha.garcia@zerocancer.org 515 King St, Ste 420 Alexandria, VA 22314-3137	Participation Type: In-Person	ξ	\$0.00			
	Extra Gift:	ş	\$0.00			
		Participant Total: \$	\$0.00			
		Access your Participant Co	enter			

Your Registration is Complete! You can navigate away from this page or explore your Participant Center next.

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