

RACE PACKET PICK UP AUTHORIZATION FORM

I, _____ authorize the following individual to pick up my race packet.
(Print full name of Race Participant)

(Print full name of authorized individual)

The authorized individual is aware that he or she must present his or her own photo ID, this printed/physical authorization form, confirmation of registration, and a copy of my photo ID (either text/email/or photocopy) in order to receive my race packet. **Note:** Race packets will not be replaced in the event it is lost or missing after the race packet has been picked up.

Signature of Race Participant

Date