

# PACKET PICK-UP AUTHORIZATION FORM



\_\_\_\_\_

Runners Full Name

Please Print

\_\_\_\_\_

Full Name of Authorized Individual

Please Print

Please check box for the race packet you need picked up:

5K

My representative is aware that he/she must present the following in order to receive my race packet and swag:

- His/her own photo ID
- This form

\_\_\_\_\_  
Signature of Race Participant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Authorized Individual

\_\_\_\_\_  
Date