Packet Pick Up Authorization Form

In order to have someone else pick up a packet on behalf of a participant, the following fields MUST be completed. The person who is authorized to pick up the packet must bring this completed form to the packet pick up location along with a copy of the participant's photo ID.

Participant Bib Number_______________________
Participant First Name _______________________ 
Participant Last Name _______________________
Name of person authorized to pick up race packet ________________________________
Date of Packet Pickup ________________________________