

Race Packet Pickup Authorization

Runner's Full Name: _____

Please Print

I authorize the following individual to be issued my race packet in my absence:

Please Print the Full Name of the Authorized Individual

- Run for the Dream: Half Marathon
 8K Run/Walk
 Masters 8 km National Championships
 Kids Fun Run

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
- ✓ A copy of my military ID if applicable for active-duty discounted registration
- ✓ My registration confirmation
- ✓ This form

Signature of Race Participant

Date

Signature of Authorized Individual

Date

