



spectrum sports
MANAGEMENT, INC.

Packet and Bib Pick-Up Authorization Form

(Please Print Your Full Name*)

(Please Print Your Bib Number*)

(Please Print Your Full Birth Date*)

(Please Print Your Drivers License Number)

I am unable to pick up my own race packet. I authorize:

(Print Name of Person You Are Authorizing to Pick Up Your Items)

To pick up my Race Bib and Shirt.

I have provided my representative with:

- **A copy of my valid driver's license or photo identification card***
- **A signed and printed out Event Waiver***

(Signature of Race Participant)

(Signature of Representative)

***WE WILL BE UNABLE TO RELEASE YOUR BIB TO ANOTHER PERSON WITHOUT THIS INFORMATION.**