WHY Racing Events Authorization for Packet-Pick-up and Confirmation of Race Participation

Athlete Name:
Athlete Phone Number:
Race:
Race Date:
I authorize another individual to pick up my racing packet for above mentioned USAT and/or USATF sanctioned race and have provided them my ID to do so. I also confirm that I will be the individual participating and racing in this event and agree to not allow anyon else to race on my behalf. This assures the credibility of race results and provides the race director with the contact and emergency information required for all participants. I understand that if I transfer my racing chip and bib to another individual without informing the race director so they can adjust all contact and racing information, that individual will be disqualified and I may be fined \$100.
Signed:
Date:

