

# THE NEWPORT NEWS ONE CITY MARATHON

## PACKET PICK-UP AUTHORIZATION FORM

Runner's Full Name

Please Print

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

Full Name of the Authorized Individual

Please Print

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

- ☐ The Newport News One City Marathon
- ☐ Half Marathon
- ☐ Maritime 5K
- ☐ Nautical Mile

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



[www.FlatOutEvents.com](http://www.FlatOutEvents.com)