

PACKET PICK-UP AUTHORIZATION FORM

The undersigned "friend" has my permission to pick up my race packet.

<u>I understand that there is no transfer fee if I am unable to participate and want to give my bib to someone else.</u>

I understand that any individual that is involved in using someone's bib under anyone else's name will be banned from all future Peace Officer Memorial Run events.

MAKE SURE YOU HAVE A COPY OF THE RUNNER'S PHOTO ID!

Runner's Name		Friend's Name
Runner's Signature		Friend's Signature
	Bib Number To be assigned	