## **PACKET PICK-UP AUTHORIZATION FORM**

If you are unable to pick-up your race bib in person at one of the packet pickup locations on Friday or Saturday before the race, you can authorize someone else to pick it up for you. To use this form, you must attest that you will not sell, give away, or let anyone else run the race with your bib. If we find that someone else completes the race wearing your bib, your name will be removed from the results, and you will be banned from entering any future events.

## **PARTICIPANT STATEMENT**

Name of registered runne	r (you)		
Your race distance –	Marathon	Half Marathon	5K
Initial to agree:			
does not allow the sale of	race bibs and, by signinally registered, and I will	r Permanente Napa Valley Ma g this form, I attest that only I not sell or give away my bib t v to pick up my bib.	will use this bib for the
Printed name of person a	uthorized to pick up my	bib:	
This person's mobile num	ber in case follow-up is	needed:	
Your signature			Date