

Authorization form

I hereby give,

Last Name: ………………………………………….

First Name: ………………………………………….

Date of birth: ………………………………………….

Permission to,

Last Name: ………………………………………….

First Name: ………………………………………….

Date of birth: ………………………………………….

Hereafter authorized representative to collect my race package on my behalf.

Date: ………………………….

Signature: Signature authorized representative

……………………………. ………………………………………….