



spectrum sports
MANAGEMENT, INC.

Packet Pick-Up Authorization Form

(Please Print Your Full Name*)

(Please Print Your Bib Number*)

(Please Print Your Full Birth Date*)

(Please Print Your Drivers License Number)

I am unable to pick up my own ride packet. I authorize:

(Print Name of Person You Are Authorizing to Pick Up Your Items)

To pick up my Bike Number and Merchandise

I have provided my representative with:

- **A copy of my valid driver's license or photo identification card***
- **A signed and printed out Event Waiver***

(Signature of Race Participant)

(Signature of Representative)

***WE WILL BE UNABLE TO RELEASE YOUR BIKE NUMBER OR MERCHANDISE TO ANOTHER PERSON WITHOUT THIS INFORMATION.**