



2025 Packet Pick Up Authorization Form

Please print. This form must be surrendered at pick up.

If you are unable to pick up your race packet, you may authorize a representative to do so for you during the Packet Pick-Up hours at the Health & Fitness Expo. Your representative must bring this completed form with them to the Saint Paul RiverCentre.

1. Representative goes to Packet Pick Up area of the participant's race distance and race number.

Example, 10 Mile Race Number: 569

Go to Medtronic TC 10 Mile Packet Pick Up, section 1 - 1000

2. Representative presents this form and their own valid photo ID to the volunteer.
3. Representative checks your packet to confirm accuracy. Representative checks your packet through the chip check machines to verify your information is correct.

The undersigned has permission to pick up my race number, packet, and participant gift. Twin Cities In Motion (TCM) is relying on the foregoing authorizations and participant agrees to indemnify and holds TCM harmless for any damages associated with such authorizations and/or as a result of TCM's reliance on such authorizations to its detriment.

I understand that only the runner assigned to this race number may participate. Therefore, I understand that selling or swapping race numbers is prohibited and that any party to such will be disqualified from this year's race and banned from future TCM events.

Participant's Race Number

Participant's Name (signature not required)

Representative's Name

(_____)_____
Representative's Phone

Representative's Signature

Date

