



MEDTRONIC  
TWIN CITIES MARATHON  
WEEKEND

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 friend 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 directly to the area of the runner's race number.  
Example, Race Number: 569  
Go to the Packet Pick Up section 1- 1000
2. Representative presents this form and his or her own valid photo ID to the volunteer.
3. Representative checks your packet through the chip check machine 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 agree 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.

\_\_\_\_\_  
Runner's Race Number

\_\_\_\_\_  
Participant's Name (signature not required)

\_\_\_\_\_  
Representative's Name

(\_\_\_\_\_)\_\_\_\_\_  
Representative's Phone Number

\_\_\_\_\_  
Representative's Signature