



WILDFLOWER

EXPERIENCE

2025 Wildflower Experience Packet Pick Up Authorization

Name: _____

Registration Confirmation No: _____

(from your confirmation email)

I hereby authorize _____ to check-in on my behalf for the 2025 Wildflower Experience. They will provide a copy of their identification with this letter. I have provided a copy of my identification for this purpose and this is attached.

I further confirm that I have signed my online waiver and have purchased my USAT Membership or Day Membership.

Signed: _____

Attached documents: (check all attached, these will be returned with your race packet)

- ☐ Copy of my ID
- ☐ Copy of ID for person authorized to pick up your race packet

Acceptable forms of ID are:

Current Driving License; or Passport

For Office Use:

Race number issued: _____

Issuer: _____