



## TRANSFER TO ANOTHER DISTANCE FORM

Name: \_\_\_\_\_

Email: \_\_\_\_\_

Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Phone: \_\_\_\_\_

Current Distance on your registration: (Please Circle)

42km      21km      10km      5km      2km

Current Bib No: \_\_\_\_\_

Distance you wish to transfer to: (Please Circle)

42km      21km      10km      5km      2km

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Office Use Only

Distance Increase Fee (if applicable)

Total Payment \$ \_\_\_\_\_.

Circle: Cash or Credit Card

New Bib No \_\_\_\_\_