



AUTHORIZATION

to collect starter packages for the Vienna City Marathon /
Wiener Städtische Half Marathon / Powerade Relay Marathon

I (NAME/FIRSTNAME of PARTICIPANT) AUTHORIZE

..... (NAME/FIRSTNAME of COLLECTOR)

to collect my starter package/bib number for the following 2025 event:

VIENNA CITY MARATHON WIENER STÄDTISCHE HALF MARATHON POWERADE RELAY MARATHON

VIENNA 5K

BIB NUMBER _____

MOBILE PHONE NUMBER _____

Please bring these documents:

-) CHEK-IN-PASS / QR CODE

-) Collector's PASSPORT or GOVERNMENTAL PHOTO ID

COLLECTOR'S CONFIRMATION OF RECEIPT

I confirm with my signature that I will not pass on the BIB number I have collected for the participant identified above to a third person. I am aware of the fact that the BIB number is the only means of identification in case of emergency. I am aware of the fact that passing on the BIB number to another person can endanger another person in case of emergency, and that such an offensive behavior constitutes a transgression of the authorization and can lead to liability.

The race number may only be handed over once an official exchange of participant data has taken place online or at the help desk on site.

Date

Participant's signature

Date

Signature of the person collecting bib number