



2017 REGISTRATION TRANSFER FORM

RUNNER SERVICES

I, _____, the **original participant** of the race entry, understand that by transferring my registration I will no longer be able to participate in the below mentioned event, nor will I be eligible to receive a participant race shirt, race bag or finishers medal. I hereby authorize the Pittsburgh Three Rivers Marathon, Inc. to transfer my:

- _____ DICK'S Sporting Goods Pittsburgh Marathon race entry
- _____ UPMC Health Plan Pittsburgh Half Marathon race entry
- _____ FedEx Ground Pittsburgh Marathon Relay team member race entry*
- _____ UPMC Health Plan-UPMC Sports Medicine Pittsburgh 5K Run race entry

to, _____, the **new participant** of the race entry. Pittsburgh Three Rivers Marathon, Inc. does not authorize transfers that are arranged outside of the transfer policy and withhold entries are that not fully transferred. The transfer policy is in place to verify the validity of the transfer and to ensure that the race entry is transferred into the name of the new runner.

Transfer Type (please check one option):

_____ I am **"Gifting"** my race entry to the new receipt and will not receive a refund. A \$30.00 transfer fee is due at the time of the new recipients' registration. **All Relay transfers must be gifted.*

_____ I am **"Transferring for Refund"** my race entry to the new recipient and will receive a refund of my original registration fee, minus the \$30.00 transfer fee + processing fees, after race day. (Refunds will go back onto the CC that you originally used to register. If you registered via check, you will receive a refund check 4-6 weeks after race day.) The new registrant will pay the current event registration fee at the time of transfer.

Original Participant Name (printed): _____ Date: _____

Original Participant Signature (Digital Signature Accepted): _____

New Participant Name (printed): _____ Date: _____

New Participant Signature: _____

STAFF USE ONLY: BIB # _____
Transfer Fee Payment Method (circle): COLLECTED ON SITE INVOICE CHARITY
New Runner Payment Method (circle): CASH CHECK- CK# _____ CREDIT CARD
Amount: _____