



REGISTRATION CHANGE FORM

September 14-15, 2018

YOUR NAME AS IT APPEARS ON CURRENT REGISTRATION

LAST NAME

SUFFIX

FIRST NAME

M.I.

RACE THAT YOU ARE CURRENTLY REGISTERED FOR (CHECK ONE BOX BELOW)

FLY! FIGHT! WIN! CHALLENGE

FULL MARATHON

HALF MARATHON

10K

5K

PLEASE CHANGE MY CURRENT REGISTRATION TO

CHECK ONE OF THE BOXES BELOW

FLY! FIGHT! WIN! CHALLENGE

FULL MARATHON

HALF MARATHON

10K

5K

If you would like to change races, you will be charged a \$15 fee plus other applicable charges. You must sign and submit this form by email (usaf.marathon@us.af.mil), fax (1-937-656-1000), or mail (88 ABW/CVM, 5030 Pearson Rd. Bldg. 219, room 106, WPAFB, OH 45433). Please provide the information requested below and we will contact you regarding payment. You must submit this form before the race sells out. There will be NO race changes at the Expo. The Marathon office must have a signed copy of this form and payment on file before any race changes will be processed. If you have any questions, please call 1-800-467-1823.

Signature _____

Phone: _____

Date _____

RACE CHANGE FEES - SUBJECT TO AVAILABILITY

Race change fees vary depending on the race you are changing from and the race you are changing to. Contact the Air Force Marathon office at the number below to determine your fee.

REGISTRATION FEE IS NON-REFUNDABLE AND NON-TRANSFERABLE

For more information call 1-800-467-1823 or visit our web site www.usafmarathon.com

STAFF USE BELOW

AMOUNT PAID

FORM OF PAYMENT

CASH

CHECK

MONEY ORDER

MASTERCARD

VISA

STAFF MEMBER SIGNATURE _____