



**N** NOVANT  
HEALTH

**CHARLOTTE**  
MARATHON

### SWITCHING REQUEST FORM

Date of Request \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ Date of Birth \_\_\_\_\_

Email \_\_\_\_\_

Registered for which event? \_\_\_\_\_

Wish to switch to which event? \_\_\_\_\_

#### **FEES:**

There is a \$10 switching fee due to the disposable timing tag attached to your current race number, the different number designs for each event, as well as different t-shirts.

#### **SWITCHING FROM:**

**5K to Half Marathon:** \$70 + \$10 processing fee

**Half Marathon to Full:** \$15 + \$10 processing fee

**Full Marathon to Half:** No processing fee

**Full Marathon to 5K:** No processing fee

**Half Marathon to 5K:** No processing fee

#### **MAIL COMPLETED FORM TO:**

CHARLOTTE MARATHON

Attn: Registration Department

901 S. King's Drive #100

Charlotte, NC 28204

Signature \_\_\_\_\_ Date \_\_\_\_\_