



AWARD MEDAL REQUEST FORM

**PLEASE NOTE: Awards are given to the TOP 5 in each Age Division*

Please mail request form with payment to: 13.1 Marathon – Miami Beach
Attn: Awards
P.O. Box 56-1081
Miami, FL 33256

RACE: _____

DIVISION: _____ PLACE: 1ST 2ND 3RD 4TH 5TH
(Circle ONE)

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ - _____

SHIPPING AND HANDLING: _____ \$4.00

PAYMENT: CHECKS ONLY

CHECK #: _____

Make checks payable to PR Racing Miami
Please allow 2-3 weeks for processing and delivery.