

WASATCH 100 RUNNER DNF FORM

Aid Station _____ Date _____ Time _____

Runner# _____ Runner Name _____

Time Into Station _____ Person Confirming DNF _____

Reason For DNF _____

Going Where _____

How _____

Signature Of Runner _____

Enter In-Time before attempting DNF entry.

Packet System DNF Data Entry Template:

>DNF,3 dig. runner #,4 dig.time,1 char. code, Where, How

>DNF, _____ , _____ , _____ , _____ , _____
 RNUM TIME Code WHERE HOW

Codes:

Medical	M
Quit	Q
Time	T