

The Dan Kelley Twilight Mile

© St. Joseph by-the-Sea H.S.

“Remembering a Teammate, a Coach & a Friend”

Friday July 23, 2010

5:00 First Race

RACE ENTRY

\$10.00 Pre-Race

(Before July 16th)

\$15.00 Race Day

Pre-Race Starts @ 4 PM

**Post-Race: BBQ, Music,
Refreshments, & Fun!!**

*** Bring your race spikes
for a fast mile at our
Track!!**

**The Race will be seeded
on the Day of the Meet**



AWARDS

**Top 3 Overall Men
Top 3 Overall Women**

PLUS

**Winners of each
Age Group Category
Ages: 10-14, H.S., 18-19,
20-29, 30-39, 40-49,
50-59, 60+**

**SPECIAL: Top 4 x Mile
Men & Women's Awards
– more info to come**

Questions: Contact – Chris Mancusi (917) 837-0594 or CoachMancusi@aol.com

Last Name: _____ First Name: _____ Phone: () _____

Address: _____ City: _____ State: _____ Zip Code: _____

E-Mail Address: _____ Sex: Male _____ Female _____ DOB: _____

Age Group: 10 -14, H.S., 18 - 19, 20 - 29 30 - 39, 40 - 49, 50 – 59, 60 +

**MAIL ENTRIES TO: Dan Kelley Twilight Mile c/o Chris Mancusi * 132 Demopolis Ave * S.I., NY 10308
Checks made payable to “St. Joseph by-the-Sea H.S.”**

WAIVER RELEASE: MUST BE SIGNED: I understand that by entering this race that I am properly trained and medically fit. I release the directors of this race, organizers and staff as well as St. Joseph by-the-Sea H.S. from any and all claims or liabilities that occur out of my participation in this event even if that may arise out of negligence or carelessness on the part of those named in this waiver. I understand that my participation in this race could, in some circumstances, result in physical injury. I give permission to the meet organizers to use my name or image in any written publication or multi-media publication. I understand that the entry is non-refundable.

Signature Date: _____

Date: _____
Parent's Signature if under 18 years of age