



Twilight X-C Relays

Entry Form

School name _____

Coach's name _____

Coach's e-mail _____

Coach's address _____

Contact number _____

Number of 3-person girls' Freshmen teams (not individuals) _____

Number of 3-person girls' Varsity 2 teams (not individuals) _____

Number of 3-person girls' Varsity 1 teams (not individuals) _____

Number of 3-person boys' Freshmen teams (not individuals) _____

Number of 3-person boys' Varsity 2 teams (not individuals) _____

Number of 3-person boys' Varsity 1 teams (not individuals) _____



Cost (unlimited entries): \$40 per team, per gender, \$70 if entering a boys' and girls' team

TOTAL COST \$ _____ (Make checks payable to MileSplit RI)

Schools will receive a race number for each of their 3-person teams. A finishing time will be provided for each team that is entered. There will be no individual times. Schools will be entered by numbers. (For example, Smithfield 1, Smithfield 2, Smithfield 3).

Mail check and entry form to:

Steve Mazzone
12 Chestnut Street,
Cumberland, RI 02864

Any questions, call 401-475-5046,
401-480-2401 or send an e-mail to
smazzone5@gmail.com

WAIVER: I hereby release MileSplit RI, Diamond Hill State Park and other coordinating group or member associated with the event from any claim or damage or injury resulting from my participation in or from this event. I attest that I am physically fit and have sufficiently trained for this event and waive any claims or injuries suffered in said event. Further, I hereby grant permission to any and all of the for going to use my photographs, video, or any record of this event for legitimate purposes.

Signature _____