ILION DAYS MINI-TRACK MEET
REGISTRATION FORM

"AGES 9 and OVER ONLY"

NAME_____ _____
First Last

TOWN/VILLAGE _____ **GRADE IN SEPT**. _____

PLEASE CIRCLE ONE

Boy/Male Girl/Female

AGE GROUP 9/10 11/12 13/14 15-19 20's 30's 40's 50's _____

800 Meter Run Yes or No **(Don Taylor Memorial)**

<u>Circle any 2 individual races of the 4 individual races below</u>

50 Meter Dash (9/10 age group only)

100 Meter Dash

200 Meter Dash

400 Meter Run

4 x 100 Meter Relay Yes or No

Teammates _____ Male or Female Age ____

Teammates _____ Male or Female Age ____

Teammates _____ Male or Female Age ____

CVA TRACK IN ILION