

Salem Kids Relays Entry Form

Please Print Legibly

School/Organization _____ Head Coach _____ Phone _____

Please check (✓) the boxes for each relay you wish to enter. This entry form and a check for \$45 (made payable to the "City of Salem") must be completed and returned to the City of Salem Parks, Recreation & Community Services Department, 555 Liberty Street SE, Room 300, Salem, Oregon 97301, no later than 5:00 p.m., on Friday, April 4. Late entries may not be accepted.

EVENTS	1 ST GRADE	2 ND GRADE	3 RD GRADE	4 TH GRADE	5 TH GRADE	Mayor's Mile
BOYS						
GIRLS						
COED						

I certify that this team was not formed nor has it practiced prior to March 3, 2008, and that I will be on the field as the lead person for the above school or organization's team the entire day of the event.

Name _____ Date _____
Signature (Head Coach)

Email address _____

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