

51st Belmont Ten Mile Road Race

Belmont, NH - Saturday August 10, 2019

Celebrating the Town of Belmont's Sesquicentennial (150th)

Time: 8:30 am SHARP

Certified Distance & #: Ten miles - #NH13006RF - Sanctioned by USA Track and Field

Registration: At Belmont Middle School. Arrive by 8:00 am for final registration and number.

Entry Fee: **\$18.00** Registration – Race and T-shirt
(Request for a specific t-shirt size must be received by July 23)



Make checks payable to "Belmont Old Home Day Committee"

Awards/Presentations: Division prizes, race results, and remaining awards presented as soon as possible once the last runner crosses the finish line and places are official. Ceremony will be held near finish line.

An Open Race: Start on Concord Street, Finish near Town Hall on Main Street

For More Information: Contact **Jeff Roberts** (603) 491-0979 or **Gretta Olson-Wilder** (603) 998-3525
Email questions to events@belmontnh.org or csrjar@gmail.com

Directions to Race: Belmont is located on Rte.140, just west of Rte.106 & five miles east of Exit 20 off Interstate 93

Computer Timing: By Yankee Timing Company/3C Race Productions

Detach and mail entry form below to: Jeff Roberts, Belmont Road Races, PO Box 922, Belmont NH 03220

IN CONSIDERATION OF YOU ACCEPTING THIS ENTRY, I HEREBY FOR MYSELF, MY HEIRS, EXECUTORS AND ADMINISTRATORS, WAIVE AND RELEASE ANY AND ALL RIGHTS AND CLAIMS FOR DAMAGES I MAY HAVE AGAINST THE SPONSOR, BELMONT OLD HOME DAY ASSOCIATION, USA TRACK AND FIELD, OR THE TOWN OF BELMONT, THEIR REPRESENTATIVES, SUCCESSORS AND ASSIGNS FOR ANY AND ALL INJURIES SUFFERED BY ME IN SAID MEET. I UNDERSTAND THAT ATHLETES WHO PARTICIPATE IN THIS COMPETITION MAY BE SUBJECT TO FORMAL DRUG TESTING IN ACCORDANCE WITH USATF RULES AND IAAF RULE 144.

NAME (Print) _____ NAME (Signature) _____ AGE _____

TELEPHONE # _____ DATE OF BIRTH _____ RUNNER (Circle) Male or Female

MAILING ADDRESS _____ CITY _____ STATE _____ ZIP _____

CLUB/SCHOOL/TEAM: _____ T-SHIRT Size S M L XL XXL (If ordered prior to July 25)

USATF # _____

PLEASE ENTER ME IN THE RACE BY THE FOLLOWING AGE GROUP (Check appropriate category)

____ HIGH SCHOOL through 18 ____ 19 through 29 ____ 30 through 39 ____ 40 through 49 ____ 50 through 59
____ 60 through 69 ____ 70 +

MAIL COMPLETED FORM AND PAYMENT TO:
JEFF ROBERTS, BELMONT ROAD RACES, PO BOX 922, BELMONT NH 03220
OR DROP OFF AT BELMONT TOWN HALL