

**29TH ANNUAL
CLOSTER LABOR DAY 5K
DOM MIRCOVICH MEMORIAL
RUN/WALK**

Sunday, September 5, 2010

The Center for
Advanced Cosmetic Dentistry
Kenneth Sloane DDS PA



CHECK-IN LOCATION <ul style="list-style-type: none"> Closter Memorial Park Harrington Avenue Closter, NJ 07624 Rain or shine COURSE <ul style="list-style-type: none"> Rolling roads through neighborhoods Timing & scoring by Elite Racing Systems Multiple water stops SCHEDULE <ul style="list-style-type: none"> 9:00 am -Check-in 9:30 am- Children's (12 & Under) Fun Run 10:00 am 5K Walk/Run 11:00 am Awards 	AWARDS <ul style="list-style-type: none"> Top three male and female finishers overall Age Group -1st three finishers; 14U, 15-19, 20-29, 30-39, 40-49, 50-59 & 60 plus First three parent-child teams Fastest Closter resident-male & female AMENITIES <ul style="list-style-type: none"> T-shirt and race packet to first 200 registered runners Ribbons to all Children's Fun runners Post race refreshments ADDITIONAL INFORMATION <ul style="list-style-type: none"> Email: labordaycloster5k@gmail.com Website: http://register.eliteracingsystems.com/ Call Mary Ann Denner at 201-230-5742
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ONLINE REGISTRATION:<http://register.eliteracingsystems.com/>

CLOSTER 5K/Fun Run ENTRY FORM

Checks payable to: Closter Recreation

Mail to: P.O. Box 143, Closter, New Jersey 07624

Last Name:		First Name:		FEES: <ul style="list-style-type: none"> \$10 By 8/28/10 \$15 Race Day \$1 Fun Run SHIRT SIZE: Circle One S M L XL XXL
Street, City, State & Zip:				
Race Type: Circle One 5K Run/Walk Fun Run		Parent/ Child Team:		
Phone:		Email:		
Sex: M F	Age on Race Day:		DOB:	

Please enter me in the DOM MIRCOVICH MEMORIAL 5K RUN. I hereby release the Closter Recreation Commission and the Closter Coaches Association, and all sponsors, race officials, and coordinators from all claims arising out of my participation in this event.
Signature (of parent, if under 18) _____ Date _____