

Crescent City Fall Classic Contest
**(Crescent City Fitness Foundation Health & Fitness Challenge
Grant Contest)**

WE NEED YOUR HELP TO WIN \$3,000 IN PRIZES



When: Saturday, November 5, 2016, @ 8:30 AM
3.1 miles - Starts & finishes next to Tad Gormley Stadium.

Included in your \$15 entry – Fall Classic t-shirt & entry into the party at the end of the race. I get ALL T-shirts & numbers and will distribute on Tues., Nov. 1st.

There are 2 ways to participate:

1) Sign up - I pick up your t-shirt & can distribute Tues., Nov. 1, 2016, your donation is enough, you don't have to run/walk.

2) Participate - WALK, RUN, OR CRAWL! Fill out the sheet & return to the parish office by Oct. 21st, I get T-shirts & number and have it available Tues. Nov. 1st for you to participate.

****VERY IMPORTANT - All forms & payment made out to *Crescent City Fall Classic* need to be brought to the parish office by Friday, October 21, 2016. If you have any questions, contact Sharon Kleefisch at 289-7728. You can make as many copies of the entry form as you want to share with family and friends. They just need to be turned in to St. Andrew the Apostle by October 21st, for us to get credit & to you receive the \$15 rate! Thank you!**

Please help **ST. ANDREW THE APOSTLE** win this year's
Crescent City Fitness Foundation Health & Fitness Challenge Grant



Assigned Race # _____

5k Race – November 5, 2016 – New Orleans City Park – 8:30am
(Please Print)

Name (First Name, Last Name) and Homeroom (St. Andrew Student)

Address (Street and Apt. Number -or- PO Box Number)

City

State

U.S. Zipcode

Date of Birth

Age on Race

Area Code and Telephone Number

Shirt Size: YM AS AM AL AXL AXXL

Gender: FEMALE MALE

Email: _____

RACE ENTRY FEE: \$15.00* If returned & paid by October 21, 2016

Amount Enclosed: _____ Please make checks payable to: **Crescent City Fall Classic**

Please return to Sharon Kleefisch in the parish or school office by Oct. 21, 2016

Waiver: I know that running a road race is a potentially hazardous activity that might cause personal injury or even death. I attest and verify that I am medically able and properly trained to enter and complete this event. I agree to abide by any decision of a race official relative to my ability to safely complete the run. I assume all risks associated with participating in this event, including but not limited to, falls, contact with other participants, the effects of weather (including high temperature / humidity), traffic and the conditions of the roads and bridges, all such risks being known and appreciated by me. Having read this, and in consideration for accepting this entry, the undersigned and anyone acting on my behalf, intending to be legally bound, hereby waive and release the City of New Orleans, Crescent City Fitness Inc., City Park, the Crescent City Fitness Foundation, Inc. and the event directors, all sponsors and volunteers from all claims or damages I may have as a result of participating in this event. I understand all entries are final, with no refunds, and that the race directors reserve the right in the event of an emergency or local/national disaster to cancel the race or to change the day and/or time to a later date and that in the event of cancellation there is no refund of entry fees. Further, I hereby grant full permission to any and all of the foregoing to use any photograph, videotape, motion pictures, recordings or any other record of my participation in this event for any legitimate purpose.

Signature _____
(Parent or legal guardian's signature, if under 18)

Date _____