



41st Annual Andouille Run

Sunday, Oct. 20, 2019
8:00 a.m.

5 Mile Run & 2 Mile Run/Walk

Not 5K

PLACE:

Race Day **Thomas F Daley Memorial Park**
Festival Grounds
 Registration US Hwy 51.
 LaPlace, Louisiana

AWARDS:

2 Mile - Top 15 Male & 15 Female
5 Mile - 1st Overall Male & Female
 Age Groups (3 deep) 14-Under; 15-19
 20-24; 25-29; 30-34; 35-39; 40-44; 45-49
 50-54; 55-59; 60-65; 66-Over
 1st St. John Parish Deputy
 1st St. John Parish Firefighter

ENTRY FEE:

Make Checks Payable to: ANDOUILLE RUN - KSJB

2-Mile \$18.00 before Oct. 15th; \$20 after
5-Mile \$18.00 before Oct. 15th; \$20 after

ENTRY FEE DISCOUNTS:

Participants 18 and under, or 55 and over, take \$2.00 off the regular **pre-registration entry fee price.**

ANDOUILLE RUN T-SHIRTS:

Given to Pre-Registered entrants on race day. Late and race day entrants will pick up their shirts at a later date.

REGISTRATION LOCATIONS:

Bring to:	Mail to:
Parish President Office	Andouille Run
1801 W Airline Hwy	131 Alice Lane
LaPlace, LA 70068	LaPlace, LA 70069

RACE AMENITIES:

Plan to enjoy Jambalaya & Beans, soft drinks, fruit. Cold beer, Live Music . Then browse around the Festival Grounds featuring crafts, food, and music

Sponsors:

LaPlace Frostop - Tri Parish Welding Marathon Oil
 Mike Willilams - St. Farm Ins. LPL Financial
 Gregg's Neighborhood Market - LaPlace Cleaners
 St. John Crimefighters Za Maurin-Justice of the Peace
 New Back Medical Center - Dr Fred DeFrancesch
Jacob's World Famous Andouille

COURSE: Start & Finish at the Fesitval Grounds

For further information contact - zamaurin1@gmail.com or call 985-703-0917

Proceeds will benefit Keep St. John Beautiful

ANDOUILLE 5 MILE RUN
October 20, 2019

AMOUNT PAID

Make Checks Payable to: ANDOUILLE RUN - KSJB
 131 Alice Lane
 LaPlace, Louisiana 70068

Last Name First Name Phone: Age on Race Day

Mailing Address SEX

City State ZIP

(Check Shirt Size)
 S M L XL

All entry fees non-refundable

I know that running a road race is potentially hazardous activity. I should not enter and run unless I am medically able and pr operly trained. I agree to abide by any decision of a race official relative to my ability to safely complete the run. I assume all the risks associated with running in this event, not limited to fall, contact with other participants, the effects of weather, including high heat and/or humidity, traffic and other condition s of the road, all such risks being known and appreciated by me. Having read this waiver and knowing these facts and in consideration of your accepting my en try, I for myself and anyone entitled to act on my behalf, waive and release the St. John Sheriff's Office, RPH and all sponsors, their representativ es and successors from all claims or liabilities of any kind arising out of my participation in this event. I grant permission to all of the foregoing to use any photographs, motion pictures, recordings, or any other record of this event for any legitimate purpose.

SIGNATURE _____

DATE _____

SIGNATURE _____

Signature of Adult Required when applicant is under 18