MOUNT CARMEL ACADEMY'S



39th Annual Carmel Challenge Cup

Saturday, November 20, 2021

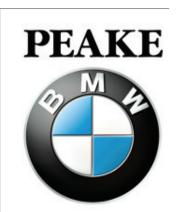
ROUTE: LAKEFRONT - RACE BEGINS BY SHELTER ONE & LANDRY'S

TIMES: 1 MILE FUN RUN - 8 AM | 5K RACE - 8:30 AM

REGISTRATION: \$20 PER PERSON (INCLUDES T-SHIRT) -or-

\$10 WITHOUT THE T-SHIRT

T-SHIRTS: MULTI-COLORED LONG-SLEEVED CARMEL CHALLENGE CUP T-SHIRTS T-shirts guaranteed to all who register by Nov. 18. After that date, if we run out of t-shirts, please pick up t-shirt ONLY at the Mount Carmel Academy Cub Shoppe. Allow two weeks for delivery.



AWARDS: 5K Race & 1 Mile Fun Race: 1st Overall (Male & Female) • 1st MCA Student • 1st MCA 8th Grader 1st MCA Freshman • 1st MCA Sophomore • 1st MCA Junior • 1st MCA Senior • 1st MCA Faculty Member (Male & Female) 1st MCA Alumna • 1st MCA Parent (Male & Female) • 1st Dog with Male Runner • 1st Dog with Female Runner (Male & Female) 1-mile: 1st place in age groups / 5K: 1st, 2nd & 3rd place in age groups

Age Groups: 0-6 | 7-10 | 11-14 | 15-19 | 20-24 | 25-29 | 30-34 | 35-39 | 40-44 | 45-49 | 50-54 | 55-59 | 60 & Over















STACIE ESTOPINAL STANLEY '89

ENTRY FORM PICK-UP:

Mount Carmel Academy 7027 Milne Boulevard

MCA website www.mcacubs.com

Race administrators reserve the right, in the event of an emergency or natural disaster, to cancel the race or to change the day and/or time. All entry fees are non-refundable.

Carmel Challenge Cup: SATURDAY, NOV. 20 | 8 AM 1 MILE WALK-RUN | 8:30 AM 5K RACE \$20 PER PERSON (INCLUDES T-SHIRT) | \$10 PER PERSON (NO T-SHIRT)

Last Name:		
City:		State:
Zip:	Phone:	
legally bound, do her and willingly waive or or entities connected	ne acceptance of this application form, reby for myself my heirs, executors, ac any and all rights and claims for da Il with this event, including Mount Ca ald them harmless from any liability	dministrators and assigns, knowingly maged I may have against persons armel Academy and other sponsors,

connection with this event. I hereby grant full permission to use my name and image in any

photographs, video tapes, motion pictures, recordings, broadcasts or other records of event, and

that my physical condition has been verified by a licensed physician.

PAID: □ Check □ Cash Please make check to "Mount Carmel Academy"		
T-SHIRT SIZE: (check one):		
\square YL \square S \square M \square L \square XL \square XXL		
MCA STUDENTS ONLY: HMRM		
OTHER PARTICIPANTS: Give credit to □ 8 □ 9 □ 10 □ 11 □ 12		

SEND THIS FORM AND CHECK TO:

Mount Carmel Academy 7027 Milne Blvd. | New Orleans, LA 70124