

4TH OF JULY PARADE APPLICATION 2016

NAME OF ENTRY:

NAME OF CONTACT PERSON:

MAILING ADDRESS:

E-MAIL ADDRESS:

PHONE NUMBER(S)	:_
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TYPE OF ENTRY (check one):

	FLOAT: _	COMMERCIAL		NONCOMMERCIAL/	
	OVERALL LENGTH: Is there Music or Band		· · ·	NEIGHBORHOOD ht should not exceed.13.ft.) NO	
	Approximate Number of People on/walking with Float:				
	MOTORIZED VEHIC	LES: _	No. of	Vehicles in Entry:	
	(includes cars/trucks/motorcycles/antique vehicles)				
	Is there Music or Band with this Entry? YES				
	NONMOTORIZED VI	EHICLES: _		No. of Vehicles in Entry:	

(includes bicycles/unicycles/wagons/scooters) Is there Music or Band with this ENTRY? YES _____ NO _____

4. MARCHING UNIT: _

Total Number in Group: _____

(includes walkers/dancers/drill teams/color guard) NO Is there Music or Band with this Entry? YES _

PLEASE GIVE A BRIEF DESCRIPTION OF YOUR ENTRY:

* PLEASE SIGN PARADE WAIVER BELOW.

PARADE WAIVER

The undersigned wishes to participate in the 4th of July Parade to be held July 4, 2016. The undersign acknowledges that it has been notified by the Fairport-Perinton Chamber of Commerce to be insured against any and all risk involved with participation in said parade. The undersigned also acknowledges that he/she assumes all risks involved in connection with its participation in said parade. The undersigned agrees to waive any and all claims or rights of action it may have against the Fairport-Perinton Chamber of Commerce, the Town of Perinton, the Village of Fairport or its members for damages incurred as a result of its involvement in said parade.

SIGNATURE

DATE

Lineup begins at 9:30AM and position numbers will be located on Maple Street and the surrounding side streets. Please use the East Ave entrance to line vehicles into position. We will notify you of your position number via email the week of the parade.

Please return this form to FairportPerintonChamber@gmail.com (or for questions).

Or print and mail a copy to:

Fairport-Perinton Chamber of Commerce P.O. Box 1144 Fairport, NY 14450