

D'Iberville/St. Martin Christmas Parade

SUNDAY, DECEMBER 3rd
2:00 PM

CONTACT: TOM CREEL 323-1521
OR SHARON SEYMOUR 392-2293

APPLICATION TO PARTICIPATE IN PARADE

Name of Individual/Organization: _____

Address: _____ City: _____ State: _____ Zip: _____

Date of Application: _____ Telephone: _____ Fax: _____

Entry Status: (check one)

\$10.00 Entry Fee for each participant

(Float) _____ (Car) _____ (Truck) _____ (Van) _____ (Bicycle) _____ (Motorcycle) _____

Marching Groups (No Entry Fee): Adult Group _____ Children Group: _____

Other: _____

Number of Participants: _____

Remarks:

I, (We) THE UNDERSIGNED HOLD HARMLESS THE CHAMBER OF COMMERCE FOR MYSELF AND MY EMPLOYEES FOR ANY PROPERTY DAMAGE OR PERSONAL INJURY INCURRED DURING THE PARADE SETUP AND PARTICIPATION. MOREOVER, IN THE EVENT THE CHAMBER OF COMMERCE IS SUED ON ANY ACTIONS ARISING OUT OF OR RELATED TO MY (OUR) PARTICIPATION IN THIS EVENT I (We) WILL INDEMNIFY AND PAY ANY COSTS OF DEFENSE WHICH THE CHAMBER OF COMMERCE MAY INCUR.

SIGNED (INDIVIDUAL) _____ DATE: _____

FOR (ORGANIZATION) _____
