

AMERICAN LEGION POST 263
P.O. BOX 596
ESCALON, CA 95320

Parade Entry Form

Event: PARK FETE PARADE
Location: ESCALON, CA
Date: SATURDAY, 13 JULY, 2019
Time: Lineup starts at 10:00 AM; Parade starts at 11:00 AM

(PLEASE PRINT)

Organization Name: _____

Type of Entry (The description to be used by the announcer):

NOTE: ALL ENTRIES WITH HORSES WILL BE RESPONSIBLE FOR THEIR OWN CLEAN-UP.

Number Participating in Parade: _____

Name of Coordinator: _____

Address: _____

City: _____ ZIP: _____

Phone Number: _____

PLEASE: Return Parade Applications, by 10 JULY, 2019.

TO: AMERICAN LEGION POST 263
PARK FETE PARADE
P.O. BOX 596
ESCALON CA 95320

For Questions Call: Vince Giovaniello, (209) 604-9100 or Robert Swift, (209) 595-5013

Participants in the Parade agree to accept decisions made by the Judges and to follow the rules and decisions made by the Organizers of the event. All participants also release the Organizers, Volunteers, and the City of Escalon from responsibility of loss, damage, or injury to any person or property while participating in the Parade.

I understand and agree to the terms above.

Signature of Organization Representative and/or Responsible Adult

X _____ Date _____