

REGISTRATION FORM PAGE 2

PLEASE FILL IN COMPLETELY AND PRINT CLEARLY

A. INFORMATION ABOUT YOUR ORGANIZATIONS (Please Print Clearly)

1. Organization / Group Name

Type of Group: ___Musical ___Business ___Military Unit ___Political / Advocacy ___Professional ___ Queen

___ Equestrian/Hour Unit ___ Antique Vehicle ___ Fire Unit ___ Fraternal/Service Club ___ Other

Animals ___Float

___ Religious / Spiritual ___ Social ___ Sports ___ Other

(describe)_____

Address_____

City_____ State_____ Zip Code_____

Phone_____ Fax_____ E-Mail_____

2. Contact Person_____

Address_____

City_____ State_____ Zip Code_____

Phone_____ Fax_____ E-MAIL_____

B. INFORMATION ABOUT THE ENTRY

How many people will be participating in your group (approximately.)? _____

Will your group have a float? ___Yes ___No Approximate Size_____

Will you have music?___Yes ___No

Will you have a decorated vehicle(s) other than float? ___Yes ___No Type? _____

Will you have "Throws"? ___Yes ___No

How many feet will you need for line up prior to the parade? _____

The Grand Ledge Chamber of Commerce sponsors the Holiday Parade to celebrate the Holiday Season, the Grand Ledge Community and Businesses. To provide an exciting, but safe and organized event, we ask all participating organizations to comply with our Operating Procedures and Policies listed above on this registration form.

Authorized Representative Signature_____ Date: _____

You MUST supply us with a contact Name and Phone number, as you will be called and given your line-up number.