CRESTVIEW VETERANS DAY PARADE
ENTRY APPLICATION
TO BE HELD SATURDAY, NOVEMBER 12, 2011

Official Name of Entry:

Date

Organization: ☐ Veteran ☐ School ☐ Military ☐ Other _____

Contact Person: Alternate:

Address:

City: State: ZIP:

Office Phone: Home Phone:

Fax: Mobile:

Email Address: Date:

Note:
1. **Application should be received by November 10, 2011**
2. **Official confirmation will indicate entry acceptance.**
3. **There is no cost to enter this event**
4. **Tossing of items from floats/vehicles Is allowed if they are safely tossed**
5. **Parade starts at 2:00 PM**

PARADE ENTRIES –

Vehicles_____ # Marchers _____ # Horses _____

☐ Vehicle ☐ Mounted Unit
☐ Float ☐ Marching Unit

Additional Comments:

This is a first come event as it pertains to line-up

#_____VEHICLE NEEDED

1._____

2. _____

3. _____

Submit To: **Veterans Day Parade Committee**
c/o: Administrative Services Department
198 N. Wilson Street
Crestview, FL 32536

Tel: 850-689-1895

Contact Email: fletcher.williams@cox.net

This form may be downloaded from http://www.cityofcrestview.org/events/events.htm, and sent by mail, or Email, or hand carried.