

# City of Lynn Haven Parade Entry Form

## PLEASE READ ALL RULES AND INITIAL.

\*\*\* Parade will be held on Tuesday, July 4, 2017 at 9:00 a.m. \*\*\*

\_\_\_\_\_ I understand entries received AFTER June 16, 2017 will be added to the **END of the parade.**

\_\_\_\_\_ You will be contacted with a parade rules/line-up number via email or phone call by June 27. Please **post this number clearly** on the driver's side of the windshield and ensure **all participants** connected with your entry are aware of this number.

\_\_\_\_\_ Parade line-up begins at 7:00 A.M. The first check point will be at 5<sup>th</sup> Street and Kentucky Avenue. Event Staff will direct you to your exact line up location.

\_\_\_\_\_ The parade will begin at **9:00 a.m.** Traffic will get very congested, please plan to line up early.

\_\_\_\_\_ **NO HORSES allowed "IN" A.L. Kinsaul Park.** Please pick up all animal waste and help keep our City clean.

\_\_\_\_\_ We encourage all participants to decorate! The floats will be judged between 8:00 A.M. - 8:30 A.M. Ribbons will be awarded.

\_\_\_\_\_ No more than 2 (two) vehicles per space, excluding vehicle clubs.

\_\_\_\_\_ Parade will END at the intersection of Ohio Avenue and 11<sup>th</sup> Street.

\_\_\_\_\_ **NO throwing of items** from vehicles/floats/golf carts or horses during the parade. **ONLY walkers may hand out items.**

\_\_\_\_\_ Do not create excessive gaps in parade line.

IF YOU VIOLATE THESE RULES YOU WILL BE ASKED TO LEAVE THE PARADE.

**Entry Information:**

Organization Name/Individual \_\_\_\_\_

Are you currently an elected official? \_\_\_\_\_ If yes, what is your title \_\_\_\_\_

Contact Person \_\_\_\_\_

Mailing Address \_\_\_\_\_

City and State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone # \_\_\_\_\_ Email: \_\_\_\_\_

Type of entry (circle one) FLOAT AUTO BAND if OTHER (provide explanation) \_\_\_\_\_

**Approximate** length of entry (in feet) \_\_\_\_\_

Please provide a statement for the **Parade Emcee to read** as you pass by the stage at City Hall. Please limit statement to 30 (thirty) words or less \_\_\_\_\_

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I, the undersigned have read and understand the rules of this application.

I further agree to abide by the rules and fully cooperate with City Staff.

Signature \_\_\_\_\_ Date \_\_\_\_\_

*For more information, call the Leisure Services office at (850) 271-5547 Fax # (850) 271-8551  
Monday - Friday 7:00 a.m. to 4:00 p.m. or email: tjohnson@cityoflynnhaven.com*