



100 South Second Street / P.O. Box 337

McFarland, CA 93250-0337

Ph: (661) 792-3187 / Fax: (661) 792-6846

"Dedication to the Quality of Community Life"

Parade Entry Form

Cinco De Mayo

Christmas Parade

PLEASE TYPE OR PRINT IN INK AND FILL IN ALL NECESSARY SPACES

Name of Entrant: _____ Contact: _____

Phone Number: _____ Other Number: _____

Address: _____

Participants will be placed according to their presentations. So that we may accommodate you check all that apply.

Type of Entry (Check One)

Marching/Walking: _____
How many in group: _____

Music: yes/no _____
Live or recorded/Amp.: _____

Dance: yes/no _____
How many in group: _____

Float: _____
How long: _____

Car: _____
How many: _____

Bike: _____
How many: _____

Other: _____

Category (Check One)

Pre- School _____

Elementary _____

Middle School _____

High School _____

Individual _____

Adult Civic _____

Junior Civic _____

Religion _____

Commercial _____

Equestrian _____

Government _____

Briefly describe what you would like for the announcer to say about your entry: _____

I agree to comply with all the regulations set forth the McFarland Festivals Committee (MFC) to participate in the parade indicated above. Submission of this application does not constitute acceptance. Using the information you present, we will accept applications as needed to properly balance the parade and stay within the acceptable parade length. I hereby agree that the above information is eligible as entered, and I release and hold harmless McFarland Festivals Committee (MFC), McFarland Recreation & Park District, City of McFarland, McFarland Lions Club or any of it's members or agents, and the owners or management of the grounds or location where the event is held, form any loss, damage of injury resulting form the participation in this event.

Signature of responsible party: _____ Date: _____

Please return to MFC P.O. Box 337, McFarland, CA 93250 or bring into MRPD office, or fax 792-6846